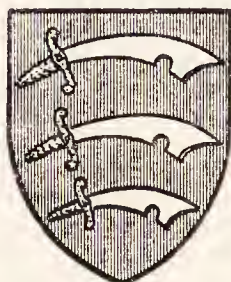


LXXI  
1960

COUNTY COUNCIL OF ESSEX



# REPORT

OF THE

County Medical Officer of Health

FOR THE YEAR

1960

---

GEORGE G. STEWART

M.R.C.S., L.R.C.P., D.P.H

COUNTY MEDICAL OFFICER OF HEALTH


8156



## CONTENTS

---

	PAGE
Preface .....	5
Health Committee .....	9
Staff of the Health Department .....	10
Statistical .....	13
General .....	23
The Care of Mothers and Young Children .....	50
The Midwifery, Home Nursing and Health Visiting Services .....	55
Preventive Medicine, Care and After-Care .....	61
The Ambulance Service .....	80
The Mental Health Service .....	83
Report of the Chief Dental Officer .....	90



Digitized by the Internet Archive  
in 2017 with funding from  
Wellcome Library

<https://archive.org/details/b29196164>



## PREFACE

COUNTY HALL

Telephone: CHELMSFORD 3231

CHELMSFORD

May, 1961

*To the Chairman, Aldermen and Councillors of the County Council of Essex*

Mr. Chairman, Ladies and Gentlemen,

I have much pleasure in presenting my Report on the health of the County for the year 1960. This is the seventh Annual Report for which I have been responsible and the seventy-first in the series of such Reports which have been presented to the County Council by successive County Medical Officers of Health since the year 1890.

### Vital Statistics

Following the trend of recent years, there was a further increase in the estimated mid-year population of the Administrative County from 1,811,000 in 1959 to 1,843,360. The natural increase in the population (i.e. excess of births over deaths) was about 12,000 and the remaining 20,000 resulted from the balance of inward over outward migration. Both these figures were higher than in recent years.

The birth rate increased by 0.5 to 16.4 per 1,000 population, the highest figure since 1948. Following the increase in 1959, the death rate reverted to the 1958 level.

The still birth rate fell for the third consecutive year and, at 16.8 per 1,000 births, compared favourably with the national rate of 19.7. The infant mortality rate also decreased to 18.6 per 1,000 live births but remained higher than the rate in 1958 (17.7) although it was well below that for the country as a whole (21.7). The perinatal mortality rate, at 29.0 per 1,000 births, was the lowest ever recorded. The Report draws attention to the close connection between perinatal mortality and birth weight and shows that the perinatal mortality rate for babies weighing between 5 and 5½ lbs. was over 2½ times that for all babies and over 5 times that for heavier babies. The six deaths from maternal causes resulted in a rate of 0.20 per 1,000 births which, for Essex, was the lowest on record.

Details are given in the body of the Report of mortality from all the major causes of death. Most of the 1960 figures follow the trend of recent years and there were further increases in the number of deaths from cancer and cardiovascular disease. With a relatively mild winter and very little influenza, mortality from respiratory diseases was the lowest for five years. A disquieting feature of the mortality statistics was a further large increase

in deaths from motor vehicle accidents especially among the young and the old. In all, 24 children and 36 persons over the age of 75 lost their lives as a result of motor vehicle accidents.

### **Mental Health**

As indicated in the body of the Report, most of the Mental Health Act, 1959, came into operation on 1st November, 1960: other parts had been brought into operation on earlier dates. The Council's draft schemes for the development of mental health services in the County, to which reference was made in some detail in last year's Report, were approved by the Minister of Health with only minor amendments in July, 1960, and progress was made during the latter part of the year with the implementation of a number of these new developments.

Among other important events of the year was the opening of the Comprehensive Training Centre at Colchester in June by Miss Edith Pitt, O.B.E., M.P., Parliamentary Secretary to the Ministry of Health. This is the first purpose-built Centre to be provided in Essex which has training facilities for adults and children of both sexes. The Report contains a plan and photographs of the new premises.

### **Yellow Fever Vaccination**

With the approval of the Ministry of Health, a yellow fever vaccination service was established at the Clinic, Coval Lane, Chelmsford, at the beginning of July, 1960.

This clinic had been designated by the Minister for the purposes of the International Sanitary Regulations and vaccinations are carried out by appointment at a charge of one guinea for each vaccination. This charge is subject to abatement in accordance with the Council's assessment scales where the persons vaccinated are normally resident in Essex.

### **Night Attendance**

As mentioned in the Report for 1959, the directly-provided night attendance service has now been extended to cover the whole of the County. The arrangements worked well during 1960 but some difficulty was experienced in recruiting staff (particularly in the seaside resorts and in some rural areas) and in affording in all cases the amount of help considered necessary.

It is evident that this new service is meeting a very real need and there is every likelihood that the demands made upon it will continue to increase as it becomes more widely known.

### **Day Centre for Handicapped Children**

For a trial period of one year, a day centre was opened in Dagenham in May, 1960, in premises previously used as a day nursery, for the purpose of



providing (without charge to the parents) special day nursery facilities for the care, training and treatment of children under five years of age with mental or physical disabilities, and an early assessment of their needs.

By the end of the year, the promising results being obtained showed that the promotion of this new project had been entirely justified and consideration was being given to making the facilities of the Centre available to handicapped children in neighbouring Health Areas.

## **Diphtheria**

It is with regret that I report an outbreak of diphtheria which occurred in Walthamstow in January, 1960, and which resulted in five clinical cases, the death of a child under school age who had not been immunised against the disease and the discovery of seventy-four carriers.

This outbreak demonstrates the importance of maintaining a high level of immunity against diphtheria, and other infectious diseases, particularly amongst the child population. The Report shows that, at the end of the year, less than half the number of children under the age of 15 years had been immunised against this disease.

## **Dental Health Education**

With the full support and co-operation of the Ministry of Health and the General Dental Council, a major dental health education campaign was launched during the year in Harlow New Town. This is referred to in some detail in the Report of the Chief Dental Officer.

The main objects of the campaign, which is to run for five years, are to stress the importance of regular dental inspection and treatment, the desirability of finishing a meal with a fibrous, cleansing food (such as apples) and the importance of the correct use of a toothbrush after food and especially last thing at night. It will be of interest to discover whether, by intensive health education, the customary habits of a community can in fact be changed to their advantage.

The initial part of the campaign is being directed towards the dental health of schoolchildren and a series of Dental Health Weeks took place which included exhibitions at various schools throughout the New Town. The progress already made in this campaign has attracted widespread interest and I am glad of this opportunity to record my appreciation of the assistance and co-operation afforded by all who have been concerned with the actual promotion of the campaign.

## **Conclusion**

In a Report which sets out merely to record the events of a year, it is not easy to evaluate or even to review adequately the health and social well-

being of any community. To do that it is necessary to take a long-term view, to compare the present with the past and to have regard to improvements in social conditions and to the changing patterns of disease over the years. Viewed in this way, there can be no doubt that, compared with 50 years ago, the physical health of the people of Essex has improved to an extraordinary degree, compared with 10 years ago there has been excellent progress, compared with a year ago this encouraging trend continues.

I am extremely grateful to the members of the staff for their continuing loyalty and hard work. I again express my sincere thanks to the Chairman and Members of the Health Committee for their consideration, patience and strong support in relation to the ever-expanding work of the County Health Department.

I am, Ladies and Gentlemen,

Your obedient Servant,

*Geo. G. Stewart*

County Medical Officer of Health

**COUNTY COUNCIL OF ESSEX**  
**HEALTH COMMITTEE**

(as at 31st December, 1960)

Chairman—Alderman Mrs. M. BALL

Vice-Chairman—Councillor Mrs. L. FALLAIZE, J.P

**County Council Members—**

*Aldermen—*

\*W. J. Bennett, C.B.E., J.P  
 Mrs. M. Bredo  
 A. E. Brown, J.P  
 F. Cullen  
 Mrs. C. Custerson  
 \*Sir Frank Foster, C.B.E., J.P

K. E. B. Glenney, O.B.E., J.P  
 Mrs. E. F. M. Hollis  
 \*C. E. Leatherland, O.B.E., J.P  
 J. Martin, B.E.M., J.P  
 Mrs. E. C. Saywood  
 G. S. Tilbury, J.P

*Councillors—*

A. J. Belton  
 A. C. Berry  
 Mrs. S. M. Bovill  
 Mrs. A. M. M. Burrell  
 A. V. Cave  
 Mrs. G. M. Chamberlin  
 Mrs. E. Coker  
 Dr. C. Daniels, J.P  
 Mrs. A. W. Dell  
 Miss D. D. Forster  
 R. Foulsham

Mrs. C. S. M. Godfrey, J.P  
 G. W. Mason  
 Mrs. P. M. Mead  
 J. W. Milbourne  
 Mrs. W. M. Palethorpe  
 H. R. Turner  
 Mrs. V. L. Walton  
 Mrs. A. E. Welsh  
 Mrs. V. L. Wilson  
 Mrs. A. V. Winch  
 E. T. Wootton

F. A. Wortley

\*Ex-officio Member

**Other Members—**

*Appointed by the County Council—*

Mrs. A. M. Martin

O. L. Oxley

D. E. Wightman

*Nominated by Other Bodies—*

H. E. Bates, M.M., J.P  
 W. J. Bowstead, J.P  
 Mrs. B. E. Double, J.P  
 Mrs. J. H. Engwell  
 H. A. Girt  
 Mrs. L. D. Gurr  
 Mrs. J. Hammond, O.B.E., J.P

Mrs. L. A. Irons, J.P  
 W. W. Kiddell  
 Mrs. A. E. Prendergast  
 Mrs. L. M. Smith  
 Miss A. S. Terry  
 Mrs. E. I. Tivy  
 A. J. Twigger

Lt.-Col. C. L. Wilson, O.B.E., M.C., D.L



# STAFF OF THE HEALTH DEPARTMENT

(as at 31st December, 1960)

## 1. CENTRAL OFFICE

*County Medical Officer of Health :*

GEORGE G. STEWART, M.R.C.S., L.R.C.P., D.P.H

*Deputy County Medical Officer of Health :*

J. A. C. FRANKLIN, M.B., B.S., D.P.H

*Principal Senior Medical Officer :*

CHRISTINA GRANT, M.B., Ch.B., D.P.H. (Barrister-at-Law)

*Senior Medical Officers :*

I. B. MILLAR, M.D., B.Ch., B.A.O., D.P.H

M. E. YORK-MOORE, M.B., B.S., D.Obst., R.C.O.G., D.P.M

(commenced 25.4.60)

*Assistant Medical Officer :*

\*LILIAN BATES, M.D. (Paris), D.P.H

*Physician Superintendent, Royal Eastern Counties Hospital :*

\*RALPH BATES, F.R.C.S., D.P.M

*Chest Physicians :*

(Joint appointments with Regional Hospital Boards)

\*J. T. BROWN, M.B., Ch.B., D.P.H

\*R. C. COHEN, M.D., B.S., D.P.H

\*H. DUFF PALMER, M.B., Ch.B., D.P.H

\*M. J. GREENBERG, M.A., M.B., B.Chir., M.R.C.P., M.R.C.S

\*F. KELLERMAN, M.D., L.R.C.P., L.R.C.S

\*VIVIEN U. LUTWYCHE, M.D., M.R.C.P

\*J. T. PATERSON, M.B., Ch.B

\*H. RAMSAY, M.D., B.S., M.R.C.S., L.R.C.P

\*E. G. SITA-LUMSDEN, M.A., M.D., M.R.C.P

\*J. F. SWOBODA, M.D. (Acting)

\*S. THOMPSON, M.B., Ch.B

\*M. WEINBERGER, M.D

\*E. WOOLF, M.R.C.S., L.R.C.P

\*W. L. YELL, M.D., D.P.H

*Chief Dental Officer :*

J. BYROM, L.D.S

*Superintendent Nursing Officer :*

MISS F. S. LEADER, S.R.N., S.C.M., Q.N., H.V.Cert

*\*Part-time Officer.*

*Health Visitor Tutor :*

MISS K. LYNCH, S.R.F.N., S.R.N., S.C.M., H.V.Tutor Cert

*County Domestic Help Organiser :*

MISS G. H. JENKINS

*County Health Inspector :*

S. E. WILLIS, M.A.P.H.I., M.R.S.H

*Assistant County Health Inspector :*

W. J. HODGKINS, M.A.P.H.I., M.R.S.H

*Technical Assistant :*

A. G. CHAMBERS

*Assistant County Ambulance Officers :*

D. S. BEEDIE

J. R. PEACHAM

*Supervising Mental Welfare Officer :*

A. L. BARTON

*Assistant Supervising Mental Welfare Officer :*

K. M. SKINGLEY

*Health Education Organiser :*

C. E. WILLIAMS

*Statistician :*

W. H. LEAK, B.A., F.S.S

*Chief Lay Administrative Assistant :*

J. G. COX

*Principal Administrative Assistant :*

J. SAUNDERS, A.C.C.S

*Senior Administrative Assistants :*

A. D. H. RIDPATH

E. W. AMOS

*Administrative and Clerical Staff*

60 whole-time and 3 part-time

## 2. CENTRALLY ADMINISTERED SERVICES

### *Ambulance Service :*

Station Officers .....	23
Assistant Station Officers .....	33
Head Drivers .....	4
Driver Attendants .....	466
Attendants .....	4
Controllers .....	2
Control Room Assistants .....	8
Clerk Telephonists .....	38
Outposted Officer (London Hospital) .....	1

### *Mental Health Service :*

Mental Welfare Officers .....	25
Training Centre Supervisors .....	14
Training Centre Senior Assistant Supervisors .....	9
Training Centre Assistant Supervisors .....	8
Training Centre Assistants .....	24
Training Centre Assistant Instructors .....	10

### *Training Homes for Home Nurses and Midwives :*

Superintendent .....	1
Deputy Superintendent .....	1
Other Nursing Staff .....	*89
Student District Nurses .....	19
Pupil Midwives (Part II) .....	19
Clerical and Administrative Staff .....	†5

\*Includes 14 part-time employees

†Includes 1 part-time employee

## 3. AREA MEDICAL OFFICERS

North-East Essex .....	*JOHN D. KERSHAW, M.D., B.S., D.P.H
Mid-Essex .....	*J. L. MILLER WOOD, V.R.D., M.R.C.S., L.R.C.P., D.P.H
South-East Essex .....	*ALFRED YARROW, M.B., Ch.B., D.P.H
South Essex .....	*W. T. G. BOUL, M.B.E., M.D., D.P.H
Forest .....	*F. G. BROWN, T.D., M.B., B.Ch., B.A.O., D.P.H
Romford .....	*F. GROARKE, M.B., L.M., D.C.H., D.P.H
Barking .....	*MARGARET I. ADAMSON, M.B., Ch.B., D.P.H
Dagenham .....	*J. ADRIAN GILLET, M.B., Ch.B., D.P.H., F.R.S.H
Ilford .....	*I. GORDON, M.D., Ch.B., M.R.C.P., D.P.H
Leyton .....	*G. T. CROOK, M.R.C.S., L.R.C.P., D.P.H
Walthamstow .....	*M. WATKINS, M.R.C.S., L.R.C.P., D.P.H

\*Part-time Officer



## 4. DECENTRALISED SERVICES

	<i>Establishment</i>	<i>No. employed (equivalent whole-time)</i>
Administrative and Clerical .....	252	244.5
Assistant County Medical Officers .....	61.1	58.9
Chiropodists .....	51.9	31.1
Clinic Clerks .....	57.7	55.5
Day Nursery Matrons .....	20	20
Day Nursery Deputy Matrons .....	19	18
Day Nursery Wardens .....	16	15
Day Nursery Nurses and Nursery Assistants .....	135	89
Day Nursery Students in training .....		84*
Dental Attendants .....	88	41.3
Dental Officers .....	88	32.5
Dental Technicians .....	9	5
Domestic Helps .....	—	1,061
Domestic Help Organisers .....	22	22
Health Visitors, Tuberculosis Visitors and Clinic Nurses .....	340.6	317
Midwives, Home Nurse-Midwives and Home Nurses .....	407	360.7
Non-Medical Supervisors of Midwives and Superin- tendents of Home Nurses .....	8	8
Occupational Therapists .....	2	1
Oral (Dental) Hygienists .....	2	0.58
Superintendent Health Visitors .....	11	11

\*3 Students equivalent to 1 Nursery Nurse or Nursery Assistant

## SECTION I—STATISTICAL

## Acreage

On 1st April, 1960, an area of 21 acres with a population at the 1951 census of 55 was transferred from the Urban District of Rayleigh to the Rural District of Rochford. The area of the Administrative County remained at 959,463 acres or about 1,500 square miles. As in previous years, difficulty was experienced in calculating vital statistics for the Mid-Essex and Forest Health Areas due to the fact that the common boundary of these Areas divides the Epping and Ongar Rural District in two. In general, vital statistics given for these two Health Areas refer to the Area less the portion of Epping and Ongar Rural District contained in it, and in the tables the figures for the Rural District are given separately. Figures for the Administrative County are unaffected by this arrangement.

## Vital Statistics

As requested by the Ministry of Health, certain vital statistics relating to mothers and infants are given below. The statistics for 1959 are also given for comparative purposes.

	1960	1959
<b>Live Births—</b>		
Number .....	30,195	28,808
Rate (per 1,000 population) .....	16.4	15.9
Percentage registered as illegitimate .....	3.8	3.6
<b>Stillbirths—</b>		
Number .....	517	522
Rate (per 1,000 births) .....	16.8	17.8
Total Births (live and still) .....	30,712	29,330
<b>Infant Mortality—</b>		
Number of deaths under one year .....	563	576
Rate per 1,000 live births (All infants) .....	18.6	20.0
Rate per 1,000 live births (Legitimate infants) .....	18.6	19.6
Rate per 1,000 live births (Illegitimate infants) .....	20.0	30.8
Neo-natal (first four weeks) Mortality rate .....	13.7	14.8
Early Neo-natal (first week) Mortality rate .....	11.9	12.8
Perinatal (stillbirths and first week) Mortality rate .....	29.0	30.4
<b>Maternal Mortality (including abortion)—</b>		
Number of deaths .....	6	8
Rate per 1,000 total births .....	0.20	0.27

Most of these statistics are commented upon in detail elsewhere in this Report.

In Table I on page 96 there will be seen details of the population and the principal vital statistics for each County District in addition to the 11 Health Areas into which the County is divided for the day-to-day administration of the functions of the Council as local health authority. Tables II and III give details of deaths by cause. The remainder of this Section is devoted largely to a discussion of the figures in these tables.

## Population

The Registrar-General's estimated mid-year population of the Administrative County was 1,843,360, an increase of 32,360 compared with increases of 28,000 in 1959 and 28,400 in 1958. Essex thus maintains its position as the fourth most highly populated Administrative County in England and Wales. The natural increase in the population was about 12,000, leaving a balance of inward over outward migration of approximately 20,000, which was more than 2,000 higher than in each of the past three years.

The following table shows the estimated migration into and out of various areas of the County in the last five years :—

	1956	1957	1958	1959	1960
Metropolitan Essex* .....	— 6,130	— 6,467	— 4,958	— 2,958	— 3,897
Romford M.B. ....	+ 1,121	+ 432	+ 662	— 156	— 276
Brentwood, Chigwell and Hornchurch U.Ds. ....	+ 5,402	+ 4,366	+ 3,625	+ 3,539	+ 2,129
Harlow U.D. ....	+ 4,335	+ 4,862	+ 4,042	+ 3,198	+ 2,574
Basildon U.D. ....	+ 4,571	+ 5,424	+ 5,445	+ 4,384	+ 4,411
South East Essex and Thur- rock U.D. ....	+ 4,331	+ 6,178	+ 4,324	+ 5,680	+ 7,955
Chelmsford M.B. and R.D.....	+ 1,468	+ 1,168	+ 1,148	+ 1,371	+ 2,285
Clacton, Frinton & Walton U.Ds. ....	+ 715	+ 470	+ 591	+ 967	+ 1,224
Remainder of the County .....	+ 141	+ 1,693	+ 3,343	+ 1,894	+ 4,109
	+15,954	+18,126	+18,222	+17,919	+20,514

\* The Boroughs of Barking, Chingford, Dagenham, Ilford, Leyton, Walthamstow and Wanstead & Woodford

After making allowance for the approximate nature of migration statistics compiled from estimated increases in population less natural increase, it seems clear that Metropolitan Essex is not losing so many people now as a few years ago and that the substantial inward movement at Romford has changed to an outward movement. The migration into the urban districts on the fringe of Greater London and the New Towns is still considerable but is decreasing. On the other hand, immigration into other parts of the county is on the increase and, in the four areas shown, was larger in 1960 than in earlier years.

## Births

The number of *live births* registered during the year was 30,195 giving a crude live birth rate of 16.4 compared with 15.9 in 1959, 15.8 in 1958 and 15.2 in 1957.

For comparison with the rate for England and Wales, it is necessary to make an adjustment for the way in which the sex and age distribution of the local population differs from that of England and Wales. The adjusted rate for the County was 15.6 compared with a rate of 17.1 for England and Wales.

The birth rate increased in eight out of the eleven Health Areas. It remained the same (at the very high rate of 21.5) in South-East Essex and decreased very slightly in North-East Essex and Dagenham.

The number of births increased by over 10 per cent in the Boroughs of Ilford, Chelmsford and Wanstead & Woodford, in the Urban Districts of



Benfleet and Brentwood and in some smaller county districts including three rural districts in Mid-Essex. Births in Basildon Urban District numbered 2,117, an increase of 58 per cent. over the figure five years ago.

The number of births registered as *illegitimate* was 1,173 (23 of which were stillborn). This was 3.8 per cent. of the total number of births compared with 3.6 per cent. in both the last two years. This small increase was shared between a number of Health Areas.

There were 517 *stillbirths* registered during the year (522 in 1959) giving a stillbirth rate of 16.8 per 1,000 total births. The movement of the stillbirth rate in the last ten years is as follows :—

1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
21.5	21.6	20.8	22.7	21.7	19.4	21.1	18.3	17.8	16.8

The rate fluctuated around a value of 21 per 1,000 births from 1951 to 1957 but has declined in each of the last three years. The following table shows that the stillbirth rate was lower in the last three years than in the previous three years in all but one of the eleven Health Areas. In the eleventh, the rate in 1955-57 was low, the increase was small and the rate in 1958-60 was not very different from that of neighbouring Health Areas. In fact it will be seen that the last five Health Areas all had rates in 1958-60 above the County average.

Health Area	No. of stillbirths		Stillbirth rate	
	1955-57	1958-60	1955-57	1958-60
North-East Essex .....	179	155	22.8	18.0
Mid-Essex .....	184	196	18.2	17.6
South-East Essex .....	143	184	19.5	17.2
South Essex .....	280	263	20.9	17.0
Forest .....	204	186	22.5	15.7
Romford .....	134	111	22.6	17.6
Barking .....	71	58	24.6	19.7
Dagenham .....	104	97	22.5	20.7
Ilford .....	133	129	20.3	18.2
Leyton .....	66	74	18.6	19.5
Walthamstow .....	85	78	20.7	18.4
Administrative County* .....	1,617	1,566	20.7	17.6

\* including Epping & Ongar R.D., not included elsewhere

The number of *premature births* notified was 2,050 (281 of which were stillborn) compared with 1,900 in 1959. The number of premature births expressed as a percentage of total births for the last eight years is as follows :—

1953	1954	1955	1956	1957	1958	1959	1960
6.5	6.9	6.6	6.6	6.8	6.4	6.5	6.7

The percentage of babies weighing  $5\frac{1}{2}$  lbs. or less at birth has varied very little in the last eight years. Nearly half the premature babies weighed between 5 and  $5\frac{1}{2}$  lbs. and only 3.5 per cent. of all births weighed under 5 lbs.

### Infant Mortality

There were 563 deaths of infants under one year of age, giving an infant mortality rate of 18.6 per thousand live births compared with 20.0 in 1959 and 17.7 in 1958. The following table sets out for the last eight years mortality rates per 1,000 live births in various periods of the first year of life.

	1953	1954	1955	1956	1957	1958	1959	1960
Early neonatal mortality ..... (first week)	13.7	12.8	14.2	11.4	12.0	11.1	12.8	11.9
Late neonatal mortality ..... (second, third & fourth week)	2.9	2.3	1.6	3.4	1.7	1.8	1.9	1.8
Neonatal mortality ..... (first four weeks)	16.6	15.1	15.9	14.8	13.7	12.9	14.8	13.7
Post-neonatal mortality ..... (one month to one year)	7.7	5.9	6.2	5.5	5.6	4.8	5.2	5.0
Infant mortality ..... .....	24.3	21.1	22.1	20.3	19.3	17.7	20.0	18.6

Over the period, mortality rates at all ages have tended to fall but with some fluctuations from year to year. The fall in mortality in the first week has not been so marked as that for older babies. In 1960, 64 per cent. of all infant deaths occurred during the first week of life.

The infant mortality rate for illegitimate infants was 20.0 (30.8 in 1959 and 28.2 in 1958) compared with 18.6 (19.6 in 1959 and 17.3 in 1958) for legitimate infants. This sharp fall in the mortality of illegitimate infants is very satisfactory but, as the rate is based on very few deaths (23 in 1960), too much significance should not be attached to it.

### Perinatal Mortality

The perinatal mortality rate was 29.0 per 1,000 total births compared with 30.4 in the previous year. This was the lowest rate ever recorded in the County, being 0.2 per 1,000 births lower than that for 1958. The figures for the past ten years are as follows :—

1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
34.1	35.1	34.2	35.2	35.6	30.5	32.8	29.2	30.4	29.0



Perinatal mortality is closely associated with birth weight. Using figures available from the follow-up of notified premature births, perinatal mortality rates can be calculated for births of different weights. The following table gives them for the period 1958-60.

3 lbs 4 ozs or less	3 lbs 5 ozs— 4 lbs 6 ozs	4 lbs 7 ozs— 4 lbs 11 ozs	5 lbs— 5 lbs 8 ozs	Over 5 lbs 8 ozs	All weights
764	336	139	80	14	29

The perinatal mortality rate for infants of over 5½ lbs. was less than half that for all infants, whilst even for slightly underweight births (those over 5 lbs) it was more than five times as high. At lower birth weights, there were progressively fewer survivors and, in the lowest weight group, only one out of four babies born survived.

#### Deaths from all causes

The number of deaths registered during the year (after adjustment for inward and outward transfers) was 18,349 (18,727 in 1959 and 18,052 in 1958). The crude death rate was 10.0 per 1,000 population compared with 10.3 in 1959 and 10.1 in 1958.

The adjusted death rate (i.e. the rate comparable with adjusted rates for other areas and with the crude rate for England and Wales) was 11.0 compared with 11.4 in 1959 and 11.0 in 1958 and the England and Wales rate of 11.5.

The crude death rate decreased in most areas but in Mid-Essex and Romford there was no change, while in Leyton the rate rose by 0.2 per 1,000 population. This was associated with an increase there in the number of deaths of women over 75 from heart disease.

At the foot of Table II on page 97 is shown the number of deaths in each age group in 1960 and each of the previous five years. Owing to the increasing population, total deaths tend to increase year by year. There was a particularly large increase for both males and females from 1958 to 1959. The 1960 male deaths were back at the 1958 level but female deaths remained at the level reached in 1959. The number of male deaths decreased at most ages, mortality among boys between 1 and 5 being especially favourable. There was little change in the number of female deaths at different ages. Trends from individual causes of death are not always the same as for all causes as may be seen from the following paragraphs.

## Tuberculosis Deaths

Deaths numbered 118 of which 12 were non-respiratory compared with 114 (8 non-respiratory) in 1959. The deaths from all forms of tuberculosis in the last ten years were as follows :—

Year	Males						Females					
	0—	25—	45—	65—	75—	Total	0—	25—	45—	65—	75—	Total
1951	21	60	120	45	11	257	25	54	37	15	5	136
1952	5	45	89	33	7	179	14	42	33	10	2	101
1953	8	41	95	36	13	193	13	43	25	9	9	99
1954	4	27	58	26	13	128	9	29	19	11	4	72
1955	7	16	46	33	11	113	7	20	14	6	9	56
1956	1	18	47	28	9	103	2	15	13	5	3	38
1957	1	18	48	23	13	103	2	19	11	8	5	45
1958	4	5	40	28	20	97	5	7	16	9	4	41
1959	1	15	32	25	10	83	2	9	16	3	1	31
1960	—	8	30	33	14	85	1	13	7	10	2	33

Although the total number of deaths was 4 more than in 1959, deaths under the age of 65 decreased and there was only one death under the age of 25 compared with 46 in 1951 and 14 as recently as 1955.

## Cancer Deaths

Deaths from cancer (all sites, including leukaemia) in the County in the last ten years are set out below :—

	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
Stomach .....	501	488	510	451	493	492	470	484	532	507
Lung & Bronchus	503	534	494	637	653	755	788	751	881	898
Breast .....	273	314	305	308	323	338	355	337	368	387
Uterus .....	121	113	104	106	132	119	113	127	130	138
Others .....	1,529	1,561	1,574	1,589	1,616	1,631	1,734	1,669	1,736	1,759
Leukaemia & Aleukaemia	76	83	80	91	109	106	86	125	112	121
Total .....	3,003	3,093	3,167	3,182	3,326	3,441	3,546	3,493	3,759	3,810

Deaths from cancer continue to increase at an average annual rate of 3 per cent. Deaths from three sites have been increasing at a faster rate than this : cancer of the lung by about 8 per cent., leukaemia by about 7 per cent. and cancer of the breast by about 5 per cent. Deaths from cancer of the stomach have remained steady, whilst the increase at other sites (including the uterus) has been at about the same rate as the increase of population.



The age distribution of cancer deaths is as follows :—

Year	Males						Females					
	0—	25—	45—	65—	75—	Total	0—	25—	45—	65—	75—	Total
1951	29	96	617	482	377	1,601	20	102	512	400	368	1,402
1952	14	85	614	503	368	1,584	27	119	554	391	418	1,509
1953	20	91	648	531	409	1,699	19	97	540	413	399	1,468
1954	27	90	666	526	380	1,689	25	109	561	384	414	1,493
1955	32	97	636	541	405	1,711	28	127	594	426	440	1,615
1956	37	80	719	565	418	1,819	29	113	567	440	473	1,622
1957	26	79	687	610	465	1,867	18	131	626	448	456	1,679
1958	35	72	743	586	461	1,897	23	95	597	447	434	1,596
1959	38	96	814	632	483	2,063	22	102	608	464	500	1,696
1960	24	82	828	649	465	2,048	23	114	593	495	537	1,762

Deaths have increased by approximately the same percentage for each sex. The greatest percentage increases were for males between 45 and 75 and for females over 75 years of age. This difference is associated with the higher incidence in males of cancer of the lung with a relatively low average age at death.

### Deaths from Diseases of the Circulatory System

The numbers of deaths from diseases of the circulatory system including vascular lesions of the nervous system since 1954 were as follows :—

Disease	1954	1955	1956	1957	1958	1959	1960
Vascular lesions of the nervous system .....	2,168	2,274	2,460	2,382	2,365	2,426	2,443
Coronary disease, angina .....	2,422	2,506	2,653	2,794	3,006	3,102	3,270
Other heart disease* .....	2,862	3,010	3,135	2,904	2,955	2,816	2,609
Other circulatory disease .....	748	760	795	767	785	836	883
Total .....	8,200	8,550	9,043	8,848	9,121	9,180	9,205

\* including hypertension with heart disease

About half of all deaths in Essex are attributed to these diseases.

Between 1954 and 1956, deaths increased in each disease group but, since 1956, total deaths attributed to diseases of the circulatory system have only increased very slowly. Over this period, an increasing proportion of deaths has been attributed to coronary disease with a corresponding reduction in



deaths from other heart diseases. The age distribution of deaths from diseases of the circulatory system is as follows :—

Year	Males						Females					
	0—	25—	45—	65—	75—	Total	0—	25—	45—	65—	75—	Total
1954	7	101	917	1,223	1,704	3,952	9	68	568	1,134	2,469	4,248
1955	8	96	954	1,246	1,769	4,073	14	65	581	1,101	2,716	4,477
1956	9	109	1,039	1,239	1,926	4,377	4	71	573	1,198	2,820	4,666
1957	6	101	1,092	1,287	1,798	4,284	8	67	617	1,150	2,722	4,564
1958	4	88	1,070	1,279	1,909	4,350	5	64	608	1,183	2,911	4,771
1959	12	100	1,116	1,276	1,895	4,399	3	45	583	1,144	3,006	4,781
1960	9	100	1,117	1,279	1,865	4,370	7	58	563	1,146	3,061	4,835

Most of the increase in deaths since 1956 was of women of over 75 years of age.

### Deaths from Diseases of the Respiratory System

The following table sets out the number of deaths since 1954 ascribed to influenza, pneumonia, bronchitis and other respiratory diseases.

	1954	1955	1956	1957	1958	1959	1960
Influenza .....	40	80	97	226	93	249	31
Pneumonia .....	720	883	868	927	970	1,174	1,010
Bronchitis .....	746	893	1,051	910	1,009	968	855
Other respiratory diseases .....	148	168	156	155	175	184	165
Total .....	1,654	2,024	2,172	2,218	2,247	2,575	2,061

Mortality from respiratory disease in 1960 was the lowest for five years and deaths from influenza were the lowest for over a decade.

### Maternal Deaths

There were 6 maternal deaths giving a maternal mortality rate per 1,000 total births of 0.20. This was the lowest rate ever recorded in the County.

### Accidents and Suicide

The trend in deaths from accidents and suicide during the last seven years is given below :—

	1954	1955	1956	1957	1958	1959	1960
Motor vehicle accidents .....	149	162	167	163	174	193	223
Other accidents .....	262	273	298	312	308	295	298
Suicide .....	167	170	214	174	190	173	185

In 1960, there was a further large increase in the number of deaths from motor vehicle accidents but other accidents and suicide remained at the level of the past few years.

The age distribution of the deaths from motor vehicle accidents is set out below :—

Males								Females						
Year	0—	15—	25—	45—	65—	75—	Total	0—	15—	25—	45—	65—	75—	Total
1954	8	20	23	26	14	11	102	10	3	3	5	9	17	47
1955	12	27	37	25	10	5	116	4	9	7	4	12	10	46
1956	12	24	32	30	10	13	121	2	3	7	18	9	7	46
1957	16	26	31	28	9	7	117	5	2	3	15	11	10	46
1958	7	34	38	32	15	12	138	3	7	2	8	8	8	36
1959	10	53	29	36	10	14	152	3	5	6	11	5	11	41
1960	17	33	35	41	13	20	159	7	9	5	15	12	16	64

Previous to 1960, all the increase in these deaths was in males but in 1960 female deaths increased especially among older women. There was also an increase in deaths of men over 75 years of age whilst deaths of younger men remained at about the level of the past two years. It is gratifying, however, to note that the very large number of deaths in 1959 of men between the ages of 15 and 24 was not repeated in 1960. But, on the debit side, 24 children lost their lives as a result of motor vehicle accidents, a figure not equalled for ten years.

### Morbidity

The number of new claims for sickness benefit recorded in the 52 weeks ended 3rd January, 1961, at local offices of the Ministry of Pensions and National Insurance in the County was 251,530.

The figures (in thousands) since 1951 were as follows :—

1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
217.2	200.1	233.8	206.3	233.1	235.1	299.4	243.6	278.3	251.5

The number of new claims in 1960 was higher than in each of the preceding years, except those in which there were influenza epidemics. The following table gives the average number of claims per week in two periods of the year and shows that, whilst claims in 1960 were at a relatively low level in the first quarter, they were nevertheless markedly above the average for later in the year.

Year	January-March (12 weeks)	April-December (40 weeks)
1956	7,055	3,762
1957	5,370	5,875
1958	6,882	4,025
1959	9,476	4,114
1960	6,287	4,402



## SECTION II—GENERAL

### STAFF

#### Central Office

Dr. Christine Grant was promoted to the newly-created post of Principal Senior Medical Officer as from 7th January, 1960.

Dr. M. E. York-Moore commenced duty as Senior Medical Officer for Mental Health on 25th April, 1960, in succession to Dr. R. C. Greenberg, who resigned on 28th February, 1960.

Throughout the year it was necessary to operate the Ambulance Service without a County Ambulance Officer following the death of Mr. G. F. Austin, to which reference was made in the Report for 1959, but at the end of the year arrangements had been made to fill the post.

Mr. J. C. Timmis, previously Dental Officer in the Walthamstow Health Area, commenced duty as Assistant Chief Dental Officer on 1st April, 1960, as the first occupant of this post. He left the service of the County Council on 31st October, 1960, on obtaining the appointment of Chief Dental Officer to the Staffordshire County Council. Owing to difficulties in filling the vacancy, the future of the post was under consideration at the end of the year.

#### Combined Medical Services

Dr. Margaret I. Adamson, Deputy Medical Officer of Health, Barking, and Assistant County Medical Officer of Health, commenced duty on 1st November, 1960, as Medical Officer of Health, Area Medical Officer/Divisional School Medical Officer, Barking.

Dr. G. T. Crook, former Deputy Medical Officer of Health of the County Borough of West Ham, commenced duty as Medical Officer of Health, Area Medical Officer/Divisional School Medical Officer, Leyton, on 1st March, 1960, to fill the vacancy arising from the appointment of Dr. M. Watkins to Walthamstow, as mentioned in the Report for 1959.

Dr. A. W. Forrest, who retired from the post of Medical Officer of Health, Area Medical Officer/Divisional School Medical Officer, Leyton, in 1955, continued, until 27th April, 1960, to act as temporary Area Medical Officer/Divisional School Medical Officer, South-East Essex following the death of Dr. W. J. Moffat. The vacancy was filled by the appointment of Dr. A. Yarrow, who commenced duty as Medical Officer of Health, Benfleet, Canvey Island and Rayleigh Urban Districts and Rochford Rural District and Area Medical Officer/Divisional School Medical Officer on 21st April, 1960.

Dr. James B. Samson retired from the appointments of Medical Officer of Health, Area Medical Officer/Divisional School Medical Officer, Romford, on 31st October, 1960. He was succeeded on 1st November, 1960, by Dr. F. Groarke, Medical Officer of Health, Area Medical Officer/Divisional School Medical Officer, Barking.

### Assistant County Medical Officers

There were five changes in the staff of Assistant County Medical Officers of Health. The vacancies were filled without undue difficulty.

### Additional Staff

During the year 18 additional posts of chiropodist were created for the expanding Chiropody Service, but recruitment proved difficult and only six of the posts had been filled at the end of the year.

Ten additional posts of health visitor were created during the year as an initial step in a phased annual programme to bring the establishment up to the ratio of one health visitor for each 4,000 of the population in accordance with the County Council's Proposals under the National Health Service Act, 1946. This increase ensured a minimum ratio in each Health Area of one to 6,000 population. It is proposed that eventually this programme will enable the appointment of health visitors to be made to undertake the combined duties of health visitor, school nurse and tuberculosis visitor and thus meet the recommendations of the Ministries of Health and Education that the health visitor's work should relate to the family as a whole.

### Refresher Courses

Six assistant county medical officers attended a post-graduate refresher course organised by the Society of Medical Officers of Health on "The Maladjusted Child," three medical officers attended a short course on "The Deaf Child" at the Institute of Laryngology and Otology and one a course on dental anaesthesia at the Institute of Dental Surgery. One senior medical officer attended a refresher course for principal and senior medical officers organised by the Society of Medical Officers of Health. One hundred and thirty-three health visitors, midwives, home nurse midwives and home nurses were sent to courses organised by the Women Public Health Officers' Association, the Royal College of Nursing, the Royal College of Midwives and the Queen's Institute of District Nursing.

The superintendent nursing officer and two non-medical supervisors of midwives and superintendents of home nursing attended a course organised by the Association of Supervisors of Midwives. Two non-medical supervisors of midwives and superintendents of home nursing took part in an administrator's course organised by the Queen's Institute of District Nursing. An appropriate course organised by the Royal College of Nursing was attended by ten day nursery matrons. One mental welfare officer attended an extended refresher course organised by the National Association for Mental Health. Two senior administrative officers on the Health Area staff participated in a refresher course organised by the Association of Public Health Lay Administrators.



## Motor Transport for Staff

As mentioned in previous Reports, it is the policy of the Council to provide certain members of the staff with motor cars or to approve the use of privately-owned vehicles on official business. This policy is applied to those employees whose duties require them to undertake a large amount of travelling, or where it is otherwise considered essential, in the interests of the efficient conduct of the Council's business, for officers to have the use of motor transport. In this latter respect, the Council have resolved that all nursing staff undertaking a reasonable amount of midwifery work should be provided with a car, or be authorised to use a privately-owned car, and the great majority of midwives and home nurse midwives (the only exceptions being those unable to drive and those who, on medical or other grounds, prefer not to use a car) were, during the year, using this form of transport.

On the 31st December, 1960, 683 officers employed in the County Council's Health Services were using motor transport in connection with their official duties. Of these, 242 were using cars provided by the Council and the remaining 441 were authorised to use privately-owned motor cars, motor scooters or auto-cycles. In 1959, the corresponding figures were 632, 241 and 391. Of the total of 683 officers using motor transport, 548 were members of the domiciliary nursing staff.

The vehicles provided by the Council comprised 238 motor cars and 4 small motor vans. The cars were a popular make of small 2-door saloon models, with the exception of 22 of the vehicles which were 4-door models used by Mental Welfare Officers and the County Ambulance Officer and his Assistant. Two of the vans were used by the Health Education Service for the conveyance of film projectors and display materials ; one by an occupational therapist ; and the other by a peripatetic gardener for transporting tools and equipment.

Seventeen members of the staff received loans under the Council's Assisted Purchase Scheme to enable them to purchase motor cars for use on official business, an increase of four in the number who took advantage of the scheme in 1959.

## Medical Examination of Staff

The medical examination of staff entering the County Council's service and of those leaving on medical grounds, again made heavy demands upon the time of the medical staff. The number of such examinations during 1960 totalled 6,042 (981 on behalf of other local authorities) compared with 4,411 the previous year and 3,631 in 1958.

## SITES AND BUILDINGS

### Health Centres

In January a Medical Officer of the Ministry of Health and a Valuer from the Board of Inland Revenue inspected the Aveley Health Centre with

a view to reaching a determination concerning the charges to be made by the County Council for the accommodation and services provided for the general medical practitioners.

The Valuer's report, subsequently received, recommended increases varying, according to the accommodation provided, from £90 a year to £125 a year, which recommendations were confirmed by the Minister of Health early in 1961.

### **Health Services Clinics**

New clinics were opened at Kenwood Gardens and Heathcote Avenue, Ilford; Thames View Estate, Barking; 107 South Road, South Ockendon, and The Drive, Loughton.

Work was begun on the erection of a new clinic at Harrison Close, Hutton.

An indication was received from the Ministry of Health that the Minister would be prepared to recommend loan sanction during 1960-61 for the proposed new Clinics at Cranham, Mistley and Hockley and a major extension to the Culver Street Clinic, Colchester.

### **Day Nurseries**

Approval was received from the Ministry to the building of new day nurseries at Chelmsford and Leyton but neither project was able to proceed during the year owing to difficulties in connection with the sites.

Negotiations commenced for the purchase of a site allocated by the Development Corporation for a day nursery at Basildon.

On the night of 25/26th November, a fire occurred at the day nursery in Brook Street, Colchester, resulting in serious damage. It was necessary, in consequence, to find alternative accommodation and this was made available by the Education Committee at the former Greyfriars School pending the restoration of the building.

### **Ambulance Stations**

A new ambulance station was opened at Frinton-on-Sea and the erection commenced of new stations at Buckhurst Hill and Leyton.

An indication was also received that loan sanction would be forthcoming during the financial year 1961-62 for new stations at Romford and Basildon. A site at Burnham-on-Crouch was acquired for a fire station by the Fire Brigade Committee on the understanding that part would be made available for an ambulance station. Negotiations were commenced for a site at Harlow.

### **Training Centres and Hostels for the Mentally Disordered**

The County Council's first purpose-built "comprehensive" training centre was completed at Colchester and a small "comprehensive" centre was provided in leased accommodation at Saffron Walden.



The Minister of Health undertook to recommend loan sanction during 1960-61 for the erection of new training centres at Romford, Basildon and Dagenham and a hostel for mentally subnormal children at Colchester.

A start was made on the planning of hostels for the mentally disordered, which would operate in conjunction with the psychiatric hospitals serving the County and discussions took place with officers of the two Regional Hospital Boards.

### **Housing for Nursing Staff**

New houses at Stanway, Frating and Pentlow and a pair of flats at Harold Wood were completed. In addition a house was purchased at Thundersley.

### **General**

By Circular 12/60, dated 17th June, the Ministry of Health requested the submission by 15th August of a capital building programme for 1961-62 and a tentative programme for 1962-63. Programmes were duly submitted but, apart from an indication that loan sanction would be forthcoming during 1960-61 for five projects which had been carried over from the programme for that year, no information had been received by the end of the year as to which other projects would be able to proceed during 1961-62.

Additional details about the training centres, hostels and ambulance stations will be found in the part of the Report dealing with the Mental Health and Ambulance Services.

## **DECENTRALISATION OF ADMINISTRATION**

Conferences of Area Medical Officers were held in March, May and October.

Amongst the subjects discussed were radiation hazards, poliomyelitis vaccine, chiropody, trilene anaesthesia, standardisation of supplies, establishments of administrative and clerical staff, the Report of the Working Party on Health Visiting, the Younghusband Report, and the domiciliary midwifery service.

No special difficulties arose in connection with the arrangements for the decentralisation of certain of the County Council's functions under the National Health Service Act, 1946.

## **INTEGRATION OF THE HEALTH SERVICES**

During the year under review, the three branches of the National Health Service responsible for the provision of the Health Services in the Administrative County continued to work together closely in order to avoid unnecessary hospital admissions and out-patient attendances and to facilitate the early discharge of patients from hospital.

So far as the discharge of patients is concerned, the County Council has for a number of years made available for the use of hospital staffs, special forms for the purpose of recording details regarding the discharge of patients and of the domiciliary health services which will be required after discharge has taken place. After completion at the hospital, copies of these forms are sent to the County Council and to family doctors. In this way arrangements can be made to meet the needs of patients by the provision of such services as home nursing, domestic help, or night attendance. Two types of forms are used, one for adults and the other for children.

The arrangements whereby patients discharged early from maternity hospitals were visited as necessary by domiciliary midwives continued to operate satisfactorily.

Close co-operation exists between the County Council's nursing staffs and general medical practitioners and the services of home nurses or domestic helps are readily available to patients being cared for at home. This is particularly so in the case of children although no special nursing services for the home care of children are at present available in the County. The need to provide these special nursing services was considered by the County Council, the Essex Local Medical Committee and the National Health Service Joint Advisory Committee for Essex but it was agreed that, as the existing Home Nursing Service adequately meets all known requirements, no action should be taken to provide special nursing services for the home care of children.

The National Health Service Joint Advisory Committee for Essex met on three occasions during 1960 when discussions took place on a variety of subjects including the conveyance of patients beyond hospital reception points, continuity of psychiatric care, specialist services for clinics, the Report of the Maternity Services Committee and the development of geriatric services in the Region.

### OVERSEAS VISITORS

During the year there were six different visits paid to the County by officers from overseas.

Mr. J. M. Yang, Assistant Professor, Yansee University Medical College, Korea, paid a four-day visit in February to see something of the hospital and domiciliary medical and preventive services in the rural areas.

Miss Elaine Wilson, of Melbourne University, who holds a Diploma in Social Studies, paid a one-day visit in February to learn something of the developments in new housing areas.

A Medical Officer from Afghanistan visited the Group Practice and Health Clinic Centres, Harlow, on 14th April.

Dr. Avodele Samuels, of Sierra Leone, a World Health Organisation Fellow, accompanied by Dr. M. Zahran, Chief Dental Officer, Cairo visited



the County on 24th June to obtain some knowledge of the organisation and administration of the school dental service.

Dr. Kiyoo Tsuna, of Japan, paid a three-day visit in September to learn something of the administration of maternity services in a country area, health education, the health visitors' training course, domiciliary care of premature infants and health centres.

Mr. da Silva Pico, a Portuguese Health Administrator, travelling under the auspices of the World Health Organisation, came to Essex on 10th October to visit the Harold Hill Health Centre.

### CIVIL DEFENCE

The number of volunteers enrolled in the Ambulance and First Aid Section of the Civil Defence Corps at 31st December, 1960, was as follows—comparable figures for the end of 1959 being shown in brackets :—

	Men	Women	Total
Eastern Region .....	565 (558)	794 (729)	1,359 (1,287)
London Region .....	430 (380)	498 (447)	928 (827)
	<hr/> 995 (938) <hr/>	<hr/> 1,292 (1,176) <hr/>	<hr/> 2,287 (2,114) <hr/>

The trained instructors have continued their activities and this has helped to bring enrolled volunteers up to date as regards their training.

During the year, officers employed in the peace-time Ambulance Service arranged for parties of volunteers to visit the Divisional Ambulance Controls and some of the larger Ambulance Stations. A number of peace-time Ambulance Service staff attended Courses in Civil Defence at Home Office Schools and all were successful in passing the appropriate examinations.

A number of suitable training vehicles became available during the year which allowed expansion in the training and instruction of volunteers.

### BRADWELL NUCLEAR POWER STATION

In February 1955 the Government announced in a White Paper (Cmd. 9389) a provisional programme for building by 1965 a number of nuclear power stations for the generation of electricity.

The Central Electricity Generating Board thereupon began to prepare plans for their first two nuclear power stations and, following a public enquiry, it was decided to site one of these at Bradwell, Essex, about 1½ miles from the village which has a population of 680 and on the south-east extremity of the estuary of the river Blackwater.

Construction of the Station started in June 1957, some six months earlier than the date foreshadowed in the Government White Paper, and it is hoped that the first reactor with its associated plant will be brought into operation in 1961.

As a result of recommendations contained in the Fleck Report, a Local Liaison Committee was established in order

- (a) to provide information and reassurance on the manner in which radioactive material is produced or used at the power station ;
- (b) to explain the significance of radiological measurements which are made outside the station boundaries ; and
- (c) to prepare schemes for the protection of the public in the event of an accident.

The membership of the Committee (which met once in 1960) adequately represented all the local authorities and interests concerned.

Thanks are due to the Central Electricity Generating Board for permitting visits to the Station during the year by Medical Officers of Health of District Councils and senior officers from the Central Office of the Health Department.

### LABORATORY SERVICE

In accordance with arrangements which have been in existence for a number of years County District Councils may send certain samples of water (public supplies), milk, ice-cream, shellfish, etc., and sewage effluents to one of the following laboratories :—

Public Health Laboratory, Cambridge

Public Health Laboratory, Chelmsford

Public Health Laboratory, Ipswich

Public Health Laboratory, Southend-on-Sea

Public Health Laboratory, County Hall, London

Counties Public Health Laboratories, London

The first five laboratories are available for bacteriological examinations only, such work being carried out free of charge under the National Laboratory Service. Chemical examinations are not covered by the scheme but the facilities of the Counties Public Health Laboratories are available for that purpose and the cost of such examinations, and of any bacteriological work directed thereto, is borne by the County Council.



The following is a summary of the samples examined by the laboratories during 1960 :—

Nature of Samples	Samples examined by	
	Public Health Laboratories	Counties Public Health Laboratories
Milk .....	1,354 (2,334)	537 (648)
Ice Cream (including lollies) .....	1,243 (1,114)	538 (713)
Other Foods .....	794 (634)	178 (174)
Water .....	991 (868)	600 (668)
Sewage Effluents .....	— (—)	83 (101)
Milk churns, bottles, cartons, etc.	541 (636)	— (3)
Totals .....	4,923 (5,586)	1,936 (2,307)

*Note :* Comparable figures for 1959 are shown in parenthesis

## MILK SUPPLY

### Milk (Special Designation) (Specified Areas) Orders

Since 1958, the whole of the County has been a specified area in which the use of a special designation in relation to milk sold by retail is obligatory.

The County Council enforce the Orders in those parts of the County for which they are the Food and Drugs authority and during the year no infringements of the provisions were found.

### Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949

The County Council, are also responsible for the licensing and supervision of milk pasteurising and sterilising establishments in that part of the County for which they are the Food and Drugs authority.

At the beginning of the year, there were 10 pasteurising plants licensed by the County Council, which were reduced to eight when the Chelmsford Borough Council became a Food and Drugs Authority on the 1st April and further reduced to seven when a small pasteurising plant near Colchester closed down in September. There were two sterilising plants which together with the pasteurising plants were treating 28,000 gallons of milk a day toward the end of the year. Such premises were visited on a weekly basis in the course of which 522 routine samples of milk were obtained and submitted to the special examination laid down in Parts II, III and IV of the Third Schedule of the Regulations as follows :—

	Pasteurised milk		Sterilised milk
	Phosphatase test	Methylene Blue test	Turbidity test
Samples examined .....	436 (516)	436 (516)	86 (80)
Samples failed .....	1 (—)	1 (1)	— (—)

*Note:* Comparable figures for 1959 are shown in parenthesis

Cleanliness is of the utmost importance and, in order to check the efficiency of the cleansing process to which they are submitted, samples of washed bottles were taken from time to time and submitted to bacteriological examination. Samples of churn rinsings (134 in all) were also taken and examined. Where necessary, appropriate remedial action was taken.

During the year, one large dairy adopted the Tetra Pak system of packaging milk in waxed polythene-lined containers.

### Biological Sampling

Since late 1959, when the whole of Essex became an "Attested Area," biological milk sampling has been confined to herds producing tuberculin-tested milk which is retailed without heat treatment.

Biological milk sampling during the year was as follows :—

No. of reports received .....	226
No. free from tubercle bacilli .....	225
No. inconclusive .....	1

Six samples submitted for biological examination were also examined for the presence of brucella abortus but none of them was reported as being positive.

### Milk in Schools Scheme

Milk supplies to schools continued to be kept under review.

With the exception of one, which is tuberculin tested, all supplies were of pasteurised milk. Until 1st October, 1960, samples of pasteurised milk supplies and the tuberculin tested supply were submitted to the tests laid down in the Third Schedule of the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949, and the Third Schedule of the Milk (Special Designation) (Raw Milk) Regulations, 1949 respectively, and since that date to the respective tests specified in the Milk (Special Designation) Regulations, 1960. The tuberculin tested milk was also submitted to biological examination. Results obtained from such examinations of milk delivered to the schools were as follows :—



## (a) Biological Examination—

Number of reports received .....	1
Number of samples free from tubercle bacilli .....	1

## (b) Bacteriological Examination—

Number of samples taken .....	323
Number satisfactory .....	315
Number unsatisfactory .....	8

Unsatisfactory samples were, as usual, investigated and re-checked until the necessary improvements were effected.

Supplies to certain schools in the County were changed during the year from glass containers to cartons. The results of this experiment were not to hand by the end of the year but there had not been any complaints.

**County Residential Establishments**

As in previous years, milk supplied to the County Council's residential establishments was sampled on the same basis as for schools and the samples were all found to be satisfactory.

**ICE CREAM**

During 1960, 32 of the 43 County District Councils in Essex exercised their sampling powers as regards ice cream and made use of the appropriate Public Health Laboratory facilities as follows :—

<i>Laboratory</i>	<i>No. of Authorities</i>	<i>No. of samples</i>
Counties Public Health Laboratories, Victoria Street, London .....	14 (14)	408 (531)
Public Health Laboratory, County Hall, London .....	1 (1)	120 (48)
Public Health Laboratory, Cambridge.....	2 (2)	165 (170)
Public Health Laboratory, Ipswich .....	3 (3)	73 (60)
Public Health Laboratory, Southend .....	4 (4)	416 (402)
Public Health Laboratory, Chelmsford.....	11 (10)	304 (250)
Totals ....	*35 (34)	1,486 (1,461)

Note : Figures in parenthesis relate to 1959.

\* Three authorities used two laboratories during the year, which accounts for this figure not corresponding with the one in the first sentence.

In accordance with the Ministry of Health's provisional grading schemes, samples continued to be examined by the methylene blue reduction test. The following table gives the results obtained throughout the year :—

Month	Grading				Totals
	I	II	III	IV	
January .....	52	10	0	3	65
February .....	62	7	0	2	71
March .....	72	9	1	4	86
April .....	92	3	0	2	97
May .....	113	25	4	7	149
June .....	159	20	22	14	215
July .....	140	28	18	5	191
August .....	163	29	14	14	220
September .....	129	19	7	7	162
October .....	58	7	2	3	70
November .....	79	12	2	1	94
December .....	52	14	0	0	66
Totals .....	1,171	183	70	62	1,486
Percentages .....	78.8	12.3	4.7	4.2	100

The table shows the high number of samples taken during summer as compared with winter and the high proportion of Grades III and IV samples during the warmer months of the year.

The results may be regarded as generally satisfactory ; they compare favourably with those for the previous year.

Samples submitted to the Counties Public Health Laboratories, London, were also subjected to a plate count and tests for determining the presence of coliform organisms, this form of test being more accurate than that generally used. Useful comparisons may be made from the results and a clearer picture obtained of the bacterial quality of the product than by the grading method alone.

### PLATE COUNTS

Plate Count (per ml.)	Grades					Samples per 100
	I	II	III	IV	Total	
0— .....	105 (1)	2	—	—	107	26.2
250— .....	134 (20)	7 (4)	—	—	141	34.6
1,000— .....	29 (18)	5 (5)	1 (1)	—	35	8.6
2,500— .....	10 (4)	5 (3)	1 (1)	1 (1)	17	4.2
5,000— .....	12 (7)	8 (7)	—	—	20	4.9
7,500— .....	3 (3)	2 (2)	—	—	5	1.2
10,000 — .....	9 (5)	27 (24)	8 (8)	7 (7)	51	12.5
50,000— .....	—	6 (5)	5 (4)	5 (5)	16	3.9
100,000— .....	—	1 (1)	5 (5)	6 (6)	12	2.9
250,000— .....	—	—	—	4 (4)	4	1.0
	302 (58)	63 (51)	20 (19)	23 (23)	408	—

Note: The figures in parenthesis relate to samples found to contain *bacillus coli*.

Grades I and II were generally satisfactory but there are still too many containing *bacillus coli*.

In addition to ice cream, 304 samples of ice lollies were examined. As in the case of ice cream, there is no definite bacterial standard and, although ice lollies form a far less favourable medium for the growth of bacteria than ice cream, a remarkable variation of bacterial content (including organisms of excremental origin) is often to be found in the product of some of the smaller manufacturers. The following table gives a summary of results obtained from examination of 130 such samples by the Counties Public Health Laboratories and shows the relationship between the pH of the lolly and the plate count at 37°C.

pH				Plate Count per ml.
0—3	3.1—4	4.1—5	5.1—	
=15	38	5	9	0—100
—	2	1	21	101—500
—	—	3	=13	501—1,000
—	—	—	=2	1,001—5,000
—	—	—	=5	5,001—10,000
—	—	=6	=8	Over 10,000

In non-technical terms, the more acid the lolly, the less likely is it to contain large numbers of bacteria, including *bacillus coli*.

### FOOD AND DRUGS ACT, 1955

I am indebted to the Chief Inspector of Weights and Measures for the following report on the work undertaken by his officers during 1960 in connection with the sampling of food and drugs in that part of the Administrative County for which the County Council is the Food and Drugs Authority.

During the year under review, a total of 723 samples were procured and submitted for analysis by the Public Analyst. In addition, 1,039 samples were analysed in the department's laboratory at Chelmsford. These samples were from a wide variety of food and drugs, special attention being paid to foods for which there is a statutory standard, and foods most liable to adulteration. In certain instances, samples were submitted for analysis following complaints received from purchasers.

Forty-three of the samples taken were found to be unsatisfactory and details of these are given below.

#### Milk

Thirty samples of milk were found to be unsatisfactory. They included 17



samples of ordinary milk which were found to contain added water in amounts ranging from 1 per cent to 10 per cent. Twelve samples were found to be deficient in milk fat by amounts from 3 to 15 per cent. One sample of milk from cows of a Channel Islands breed was found to be 37 per cent deficient in milk fat.

“Appeal to Cow” samples taken at officially witnessed milkings in connection with the unsatisfactory sample were, in certain instances, found to be deficient in milk fat. In these instances, the results relieved the vendors of liability to proceedings.

#### *Cream Cheese*

This article, on analysis, was found to contain :—

Fat	.....	.....	.....	.....	.....	35.9 per cent
Moisture	.....	.....	.....	.....	.....	54.0 per cent

It is considered that cheese sold under the description of “Cream Cheese” should contain at least 50 per cent of fat, and the fat content of the sample was, therefore, insufficient to justify the description applied to this article.

#### *Instant Coffee*

Three samples of Instant Coffee were found to contain sulphur dioxide preservative in quantities varying from 115 to 220 parts per million. No provision is made in the Public Health (Preservatives, etc., in Food) Regulations for the preservation of coffee extract with sulphur dioxide. All three samples consisted of the modern type of extract now marketed in powder form. As a result of enquiries, the presence of sulphur dioxide was traced to the use of fuel oil containing a high proportion of sulphur in the drying plant used in the manufacturing process.

#### *Hovis Loaf*

A Hovis loaf, cut into slices, was submitted as the result of a complaint which alleged that it contained a foreign body. Examination of the slices showed the presence of a foreign body projecting from the cut surface of the end crust. Chemical examination of this foreign body showed that it consisted of a piece of cement or concrete measuring 25 millimetres in length, wedge shaped and weighing 2.2 grams.

#### *Nut-O-Rings*

This article consisted of a nut and toffee confection moulded into rings measuring approximately 3 inches in diameter, and when submitted to this department was accompanied by two irregular shaped dark brown bodies approximately  $\frac{1}{4}$  inch in diameter. The complaint was that these foreign bodies had been found in a portion of the confection whilst it was being chewed.

The foreign matter was found to consist of pieces of porous stone, or brick and microscopical examination showed the presence of traces of nut firmly adhering to the stone.

Evidence of absorbed oil was also found.

#### *Orange Drink*

A one-third pint bottle full of orange drink was the subject of a complaint that it contained foreign matter.



Examination by the Public Analyst of the contents of the bottle showed the presence of small blackish patches on the bottom of the bottle. This foreign matter was found to be adhering to the bottom of the bottle after the contents had been removed. It was found on microscopical examination to consist mainly of a blackish mould growth including traces of blackish gritty material suggestive of atmospheric dirt.

#### *Sausages containing Foreign Matter*

Two complaints of sausages containing foreign matter were received and submitted to the Public Analyst.

A portion of a cooked beef sausage approximately 2 inches long, was found to contain a foreign body which could be seen protruding from the cut end of the sausage. On removal from the sausage, the foreign body was found to consist of a rolled up piece of open wove fabric having the general appearance of a surgical bandage rolled in the shape of a finger dressing. When unrolled it measured  $1\frac{1}{2}$  inches x 18 inches long. It was knotted at one end and contained a small piece of cotton wool.

The other sample consisted of a smoked pork sausage which had been cut lengthwise by the purchaser and was found to contain a  $\frac{1}{2}$  inch iron screw embedded in half of the sausage. The Public Analyst found no evidence to show that the screw had been forced through the skin of the sausage after manufacture and he formed the opinion that it was present in the initial sausage mix.

#### *Pork Sausages*

A sample of pork sausages was found to contain 50 per cent of meat and was, therefore, in accord with the declaration which was given at the time of sale that these sausages had a meat content of 45-50 per cent. The Public Analyst reported adversely on the basis of a tentative standard adopted by Public Analysts, namely, a minimum of 65 per cent meat content.

Another sample of pork sausages from a consignment supplied on a County Council contract requiring a minimum of 65 per cent of meat was found to contain :—

Lean meat	.....	.....	.....	.....	31 per cent
Fat	.....	.....	.....	.....	49 per cent
Total meat	.....	.....	.....	.....	80 per cent

From these figures it will be seen that the total meat content exceeded the minimum requirement of 65 per cent but, in the opinion of the Public Analyst, the proportion of fat in a sausage should not exceed half the total meat content. The fat content of the sausages sampled was, therefore, excessive.

#### *Sage*

This sample contained :—

Sand and other silicious matter	.....	4.0 per cent
---------------------------------	-------	--------------

The amount of sand and silicious matter was at least 1 per cent above that ordinarily found.

### *Hamburgetts*

This meat product was found to consist essentially of a mixture of minced meat and onion and cereal and was examined for preservatives, but the sample was found to contain 270 parts per million of sulphur dioxide. This preservative is not permitted for the preservation of a meat product by the Public Health (Preservatives, etc., in Food) Regulations.

From enquiries made it was understood that these Hamburgetts had been prepared from sausage meat which may legitimately contain preservative and it was argued that, under the Regulations mentioned, the presence of sulphur dioxide was in order.

While it was agreed that this was a perfectly reasonable explanation for the presence of sulphur dioxide in the product, it was observed that if the Hamburgetts were in fact prepared from sausage meat, then it would necessitate a special type of sausage meat being prepared since Hamburgers or Hamburgetts contain a higher meat content than ordinary sausages. In the view of the Public Analyst, the preservation of Hamburgers is a matter which should receive the early attention of the Ministry of Food Preservatives Committee.

### *Legal Proceedings*

Legal proceedings were instituted in five cases and fines and costs totalling £82 7s. 0d. were imposed.

## WATER SUPPLIES AND SEWERAGE

A rainfall of 32.91 inches during the year, measured at Langford Waterworks (as compared with 23.43 inches which is the average for the last 100 years) did much to make good the deficiencies caused by the dry summer of the previous year and at no time was there any question of shortage of supplies.

Continuing the trend begun in 1959, a large number of applications to sink boreholes or wells for the abstraction of underground water (ranging from 25,000 to 200,000 gallons a day) were made during the year. These applications were received from different parts of the County (but mainly in the north-east) and reflected the demand for water needed for irrigation purposes.

The abstraction of underground water is controlled by Section 14 of the Water Act, 1945. Under this Section, the whole of the County is covered by Water Conservation Orders and it is necessary for any person wishing to construct or extend a well, bore a hole or to do other work in the County for the purpose of abstracting water, other than for use in his own household, to obtain a licence from the Ministry of Housing and Local Government in accordance with the Underground Water (Controlled Areas) Regulations, 1949. Unfortunately there is no statutory requirement that the County Council should be notified of such applications, so that very often they only come to light following the appearance of notices which have to be published in local newspapers. The difficulty has been brought to the attention of the Minister, but he has not so far taken any action.



In Essex, with its limited resources and ever-growing population, the question of water supplies is of vital importance. It is for this reason that all noted applications concerning the abstraction of underground water are carefully investigated. On the grounds that underground water supplies should be under the control of the water undertakings in the area concerned, objection was made by the County Council in eight cases where it appeared that sources of public water supplies might be adversely affected. In three of these cases the Minister saw fit to grant licences, but at the end of the year decisions concerning the remainder had not been made known.

Particulars of applications made and licences granted during the year in respect of abstractions of underground water in the County are given in the table on the next page.

The grouping of water undertakings in the County is also a subject of considerable importance. With only the West Essex Water Area in being at the beginning of 1960, progress during the year continued, on the whole, to be slow, but steering committees were set up towards the end of the year in the Mid-Essex and North Essex Areas.

In the Colchester area a Public Inquiry resulted in the making of the Colchester and District Water Board Order, 1960, on 9th June and its coming into operation in the following month resulted in the formation of a Board comprising the areas of the Borough of Colchester, the West Mersea Urban District and the Lexden and Winstree Rural District.

In the North-east part of the County (served by the Tendring Hundred Waterworks Company, the Urban Districts of Clacton, Brightlingsea and Wivenhoe and the Tendring Rural District Council), negotiations initiated by the Tendring Hundred Waterworks Company to amalgamate these undertakings resulted in the likelihood of early application being made for an Order under Section 9 of the Water Act, 1945.

The population of the County continues to expand at an unforeseen rate due mainly to overspill from the Greater London area and growing water demands are particularly apparent in Central and South Essex; in these areas the possible shortage of water during the period 1964-1970 has given rise to anxiety.



# Underground Water Abstractions, 1960

Date of Application	Date of Licence	Gallons (galls. per day)	Place	Remarks
January .....	March .....	50,000 .....	Boxted .....	Public Supply. Existing borehole. Present
January .....	March .....	140,000 .....	Abberton .....	abstraction 70,000 g.p.d.
January .....	May .....	150,000 .....	Messing-cum-Inworth .....	Public Supply. Existing borehole. Present
January .....	March .....	200 .....	Earls Colne .....	abstraction 114,000 g.p.d.
January .....	June .....	50,000 .....	Little Bentley .....	New pumping machinery in an existing well.
February .....	— .....	60,000 .....	Weeley Heath .....	Consent to experimental works.
February .....	August .....	15,000 .....	Nazeing .....	Application was for 25,000 g.p.d. County Council objection withdrawn.
— .....	February .....	1,000 .....	Finchingfield .....	Application was for 100,000 g.p.d.
March .....	May .....	25,000 .....	Elmstead .....	
— .....	March .....	5,000 .....	Little Wakering .....	
March .....	— .....	100,000 .....	Little Hadham, Herts .....	
March .....	May .....	25,000 .....	Elmstead .....	
— .....	April .....	200 .....	Clacton-on-Sea .....	
May .....	— .....	200,000 .....	Great Bentley .....	Proposed public supply. Licence refused after public inquiry.
— .....	May .....	40,000 .....	Great Bentley .....	
— .....	May .....	80,000 .....	Great Bentley .....	
— .....	May .....	112,000 .....	Thorington .....	
— .....	May .....	112,000 .....	Thorington .....	
— .....	May .....	80,000 .....	Thorington .....	
— .....	June .....	3,000 .....	Tendring .....	
— .....	June .....	100,000 .....	Rochford .....	
— .....	June .....	100,000 .....	Langham .....	

Date of Application	Date of Licence	Gallons (galls. per day)	Place	Remarks
—	June .....	175,000	Ilford .....	This concerns an additional borehole, the abstraction figure to apply to both existing and new boreholes, only one to be worked at a time.
—	June .....	50,000	Little Bentley .....	Consent to experimental work.
—	June .....	24,000	Langham .....	
—	July .....	1,000	Stisted .....	
—	July .....	20,000	High Wych, Herts .....	
—	July .....	240,000	Harlow .....	Objection by County Council.
—	July .....	120,000	Leavenheath, Suffolk .....	Objection by County Council.
July .....	—	120,000	Pebmarsh .....	Objection by County Council.
July .....	August .....	80,000	Ardleigh .....	
—	July .....	100,000	Earls Colne .....	Objection by County Council.
—	July .....	3,500	Southminster .....	
August .....	—	100,000	Great Chesterford .....	Objection by County Council.
September .....	—	100,000	Steeple .....	Objection by County Council.
September .....	September .....	300	Sible Hedingham .....	
October .....	—	100,000	Halstead .....	Objection by County Council.
October .....	—	60,000	Thorrington .....	
October .....	—	72,000	Bocking .....	Objection by County Council.
—	December .....	140,000	Boreham .....	Abstraction from gravel pit.

Note: Where no date appears in column 1 the application was made during 1959.



The Southend Waterworks Company can only look to the South Essex Waterworks Company for the augmentation of their supplies whilst the latter, already hard pressed, have their supplies augmented by the Metropolitan Water Board to the extent, if required, of some three million gallons a day, with no guarantee of further supplies being available.

It was thus that an air of urgency was evident at a number of meetings held during the year, chiefly between representatives of the Ministry of Housing and Local Government, the Southend Waterworks Company, the South Essex Waterworks Company, the Metropolitan Water Board and the County Council, with the object of securing adequate water supplies. Discussions centred mainly upon the capabilities and goodwill of the Metropolitan Water Board but it was apparent that further supplies might not be available from the Board until at least partial completion of the Board's new treatment works at Copper Mill, Walthamstow, estimated to be not before 1969.

At the end of the year it was learnt that the Southend Waterworks Company would require more water than previously thought likely and it was then that the South Essex Waterworks Company put forward a scheme, with which it is understood the Metropolitan Water Board are in agreement, for the augmentation of their supplies by water from the Board's King George and Girling Reservoirs, the water to be treated by the Company for domestic use. The quantity of additional water required by the Company was given as 20 to 26 million gallons a day, the supply of which would necessitate the laying of a water main and the construction of a covered service reservoir. The scheme would also involve certain formalities, including the making of an Order under the Water Act, 1945, to facilitate its implementation. Allowing for all contingencies, it was estimated that water from such a scheme should be available by 1965.

A subject with a long history of negotiation and discussion is that of future arrangements for the drainage of South Essex in the areas of Romford, Hornchurch, Dagenham and part of Brentwood. The authorities concerned have failed to reach agreement on a proposal which provides for a regional scheme draining to the Dagenham sewage disposal works at Riverside and the necessary enlargement of such works. The works have been heavily overloaded for some time and it is understood that, during the year, the Dagenham Borough Council received approval from the Ministry to extend the works in accordance with a broad layout plan agreed between their consultant engineers and those of the County Council. The co-operation which has taken place between the two consultant engineers arises partly from the concern of the Ministry of Housing and Local Government that the scheme should provide adequately for integration into a regional scheme and partly from the County Council's interest in such matters as a whole.

The Dagenham Borough Council's consultant engineers are now preparing detailed design and contract documents and the County Council's consultant



engineers have been further instructed to obtain technical data to enable the size and level of regional sewers to be determined.

The Braintree and Bocking Urban District Council received the Minister of Housing and Local Government's approval in principle to schemes for enlargement of their heavily overloaded sewage treatment works. In the meantime, development restrictions continue in the drainage areas of those works. Difficulties of the same nature are being experienced elsewhere.

### Rural Water Supplies and Sewerage Acts, 1944-1955

During the year, 23 new and revised schemes of water supply, sewerage and sewage disposal, with a total estimated cost of £558,063, were submitted by County District Councils (prior to making application for contributions by the Ministry of Housing and Local Government) under the provisions of the Rural Water Supplies and Sewerage Acts, 1944-1955. The necessary consultations were held and inspections made with the consultant engineers and officers of the local authorities concerned to ensure compliance with the provisions of the County Council's Grant Scheme, and evidence was given at inquiries conducted by the Ministry's Inspectors.

The following schemes were approved and the Minister of Housing and Local Government undertook to make Exchequer contributions thereto :—

Rural District	Scheme			Estimated Cost
				£
Braintree .....	Black Notley—London Road	Sewerage .....	.....	17,599
Bromow .....	Little Hallingbury.....	Extension of sewers and sewage disposal works		28,650
	Willows Green and Causeway End, Felsted	Sewerage .....	.....	39,800
	Great Easton and Duton Hill	Extension of Upper Chelmer Valley Sewerage Scheme		12,917 (Increased Cost)
Bocking & Ongar	Matching Green and Beauchamp Roding	Sewerage .....	.....	45,000
Bread .....	District Water Scheme, Stage III	Extension of mains		64,800
Chen & Winslow .....	Eight Ash Green .....	Sewerage and sewage disposal		66,489
	Copford and Marks Tey	Sewerage and sewage disposal		46,630 (Increased Cost)
	Dedham .....	Sewage disposal. Alterations and additions to works		4,163
Don .....	Tollesbury .....	Sewerage .....	.....	6,560 (Increased Cost)
	Southminster .....	Sewerage .....	.....	7,114 (Increased Cost)
	Carried forward .....			339,722

Rural District	Scheme				Estimated Cost
Brought forward					339,722
Rochford .....	Hullbridge Scheme	Sewerage	.....	.....	22,740
	No. 2 (Stage I)				
	Eastbury Avenue	Sewerage	.....	.....	9,674
	Area				
Saffron Walden	Quendon and Rick-	Sewerage and	sewage		16,500
	ling	disposal			
	Manuden .....	Sewerage and	sewage		52,000
		disposal			
Total					£440,636
Tendring .....	Little Bromley	Water supply	.....	.....	£1,252 (Reduced Cost. Revised Estimate)

The following schemes were approved by the County Council for revenue grant purposes during the year under review :—

Rural District	Scheme		
Braintree .....	Black Notley — London Road	Sewerage	
Dunmow .....	Little Hallingbury .....	Sewerage and sewage disposal	
		<b>scheme—extensions</b>	
	Willows Green and Causeway	Sewerage	
	End, Felsted		
	Great Easton and Duton Hill	Extensions of Upper Chelmer	
		<b>Valley Sewerage Scheme</b>	
Dunmow .....	Comprehensive Water Scheme	Laying of water main	
	Final Stage		
Epping & Ongar	Matching Green and Beauchamp	Sewerage	
	Roding		
Halstead .....	District Water Scheme, Stage	Extension of mains	
	III		
	District Water Scheme .....	Water softening plant	
	Comprehensive Water Scheme,	Water supply	
	Stage II		
Lexden & Wins-	Cherry Chase, Tiptree .....	Water main extension	
tree			
	Dedham .....	Alterations and additions to	
		sewage treatment works	
	Copford and Marks Tey .....	Sewerage and sewage disposal	
		<b>scheme</b>	
	Kelvedon Road to Oak Road,	Sewerage—extension of sewer	
	Tiptree		
	Eight Ash Green .....	Sewerage	
Rochford .....	Eastbury Avenue, Clifton Road,	Water supply	
	Grasmere Avenue, Winder-		
	mere Avenue, Hawkwell Park		



<i>Rural District</i>	<i>Scheme</i>
Rochford .....	Hullbridge Sewerage Scheme, Sewerage Stage I
Saffron Walden	Stansted Mountfitchet ..... Sewer diversion Quendon and Rickling ..... Sewage disposal Manuden ..... Sewerage
Tendring .....	Little Bromley ..... Water main extension Ardleigh ..... Water main extension

During the year, work was in progress on the following grant-aided sewerage and/or sewage disposal schemes :—

Braintree Rural District	London Road, Black Notley
Dunmow Rural District	*Duck Street and Mill End, Little Easton and extension of Great Easton sewage treatment works Duton Hill and Great Easton (This scheme came to a standstill in March and the contractors went into liquidation. Tenders for its completion were received on 31st December) Hatfield Heath and Hatfield Broad Oak High Easter, High Roding and White Roding Little Hallingbury — Goose Lane and Wrights Green area and extension of sewage disposal works Willows Green and Causeway End, Felsted.
Epping and Ongar Rural District	Blackmore and Doddington Part II *Fyfield and Willingale Matching Green and Beauchamp Roding Stapleford Abbots
Halstead Rural District	Gosfield Hedinghams and Yeldham
Lexden and Winstree Rural District	Copford Ford Street (Part of Eight Ash Green Scheme)
Maldon Rural District	*Goldhanger
Rochford Rural District	Hockley and Hawkwell (Victor Gardens, White Hart Lane and Highams Road) Barling Magna (Kimberley Road) Canewdon Hullbridge (Ferry Road, Grasmere and Windermere Avenues) Hawkwell (Eastbury Avenue)
Saffron Walden Rural District	Manuden Quendon and Rickling (Sewage Works)

\* These schemes were completed during the year.



A number of grant-aided water supply schemes were also in progress during the year and the following were completed :—

Halstead Rural District	Stage III water extensions
	Great Yeldham—Water softening plant
Saffron Walden Rural District	Southern area water mains
	*Newport Water Pumping Station—installation of submersible pump

\*This work was completed during the year.

Engineering Inspectors of the Ministry of Housing and Local Government hold engineering investigations and progress inspections in connection with schemes which are attended in each case by the County Health Inspector or his Assistant. The schemes concerned during 1960 were as follows :—

<i>District</i>	<i>Details</i>
Dunmow Rural District	Duck Street, Little Easton and extensions to Great Easton Sewage Disposal Works. High Easter, High Roding and White Roding Sewerage Scheme Great Easton and Duton Hill Sewerage Scheme
Epping and Ongar Rural District	Blackmore and Doddington Sewerage Scheme. Part II Stapleford Abbots Sewerage Scheme
Halstead Rural District	Heddinghams and Great Yeldham Sewerage Scheme Pebmarsh, Toppesfield and Greenstead Green Sewerage Schemes Gosfield Sewerage and Sewage Disposal Scheme Baythorn End, Birdbrook Sewerage and Sewage Disposal Scheme
Lexden and Winstree Rural District	Eight Ash Green Sewerage Scheme.

The total estimated grants payable by the County Council to Rural District Councils in the County, for the financial year 1960-61, under Section 56(1) of the Local Government Act, 1958 and the Rural Water Supplies and Sewerage Acts, 1944 to 1955 amounted to £64,203, an increase of more than £3,000 compared with the previous year.

The annual inspection of water supply and sewerage schemes for which the County Council made contributions under their approved Grants Scheme was carried out in eight rural districts during the year. The works were found to be satisfactory in each case.

## Fairview Estate, Ashingdon—Water Supply

A request for the provision of a piped water supply to houses on this estate having been refused by the Rochford Rural District Council, the Ministry of Housing and Local Government held a local hearing into the matter. The County Council supported the local residents and the decision subsequently made by the Minister was in accordance with the County Council's recommendations. The Southend Water Company's main was accordingly extended along Cavendish Road and Woodside Road, a distance of 692 yards.

## Refuse Disposal

The tendency of average domestic refuse to become lighter and bulkier continues. There is less ash and clinker and an increase in tins, cartons, etc., whilst the paper content has increased considerably. Such changes can be attributed to the effects of the Clean Air Act, 1956, smokeless zones, and publicity associated therewith, and the changing living conditions of the population, including the increasing use of electricity. This tendency will no doubt continue and the problems of refuse disposal are likely to become even more difficult.

For many years a considerable quantity of refuse from London boroughs has been deposited on the Essex marshes and, for a shorter period and to a lesser extent, elsewhere in the County from several large boroughs in Metropolitan Essex. The refuse dumps receive in total well over a million tons of refuse a year and cover hundreds of acres. These dumps, together with a number of smaller local authority dumps and those of private contractors (33 in all) receive refuse from the area, or areas of local authorities outside that in which they are situate. They are, therefore, subject to certain provisions of the Essex County Council Act, 1933, and are supervised by officers of the Department.

The nature of the dumps calls for regular visits, and 263 inspections were made during the year. It was found necessary to send ten written warnings to offenders, but the standard of maintenance on the whole, considering the prolonged wet weather, was good. The dumps are required to be properly levelled at permitted heights, consolidated and covered. Fires are a rarity and rats are not harboured. In no instance was it necessary to recommend proceedings under the Act.

In addition to those dumps referred to above, there are a number of small dumps established following planning permission only. These are, however, subject to the same fundamental conditions of control and they occasioned 32 visits during the year.

The increasing difficulty of large authorities disposing of refuse within their own boundaries led to the Walthamstow Borough Council taking a large



proportion of their refuse into the area of the Thurrock Urban District where it is being deposited at Wennington in co-operation with the Boroughs of East Ham and West Ham. Leyton Borough Council entered into arrangements to deposit refuse in the Urban District of Hornchurch and Chigwell Urban District Council gave consideration to the disposal of refuse outside their boundaries. Five new dumps came within the scope of the Essex County Council Act.

### ATMOSPHERIC POLLUTION

By arrangement with the Counties Public Health Laboratories, London, the County Council has provided facilities for the monthly examination of samples on a co-operative basis for local authorities in Essex which participate in a planned scheme for the setting up and maintenance of atmospheric pollution recording stations as recommended by the Fuel Research Station at Greenwich. In this scheme 17 District Councils participated in one form or another and, during 1960, 508 samples were examined.

The Fuel Research Station collates the results from all recording stations and issues monthly Atmospheric Pollution Bulletins. The scheme has been in operation since early 1956 and has worked reasonably satisfactorily. Its extension in some areas is, however, desirable in order that a clearer picture may be obtained of the effect, if any, of the smoke drift from London, from other neighbouring areas, and from development within the County itself. Results so far show that the south-west part of the County is the worst affected by smoke, conditions improving according to distance therefrom, and that the effects of the smoke drift are not so apparent as would be expected. An assessment of the degree of improvement due to smoke control areas and the increasing use of smokeless fuels will take time.

### RURAL HOUSING

Housing, in its various aspects, continues to form an important part of the functions of many local authorities and the position in rural Essex at the close of 1960 may be assessed from perusal of Tables VII to IX on pages 103, 104 and 105.

The population of the Administrative County has continued its upward trend. Building has progressed apace and house values have soared phenomenally particularly in and around industrial centres. Properties have changed ownership. Many old dwellings have been demolished to be replaced by new ones while, on the other hand, the condition of some has further deteriorated. Many, however, have been repaired voluntarily. The standard of housing continues to rise and modernisation is the trend. Since 1955 when estimates were given in the Slum Clearance Returns the Rural Housing picture has continued to change and further information as to the problem and future proposals is to be found in (a), (b) and (c) at the foot of Table I. Unfortunately this is not complete, the housing survey being in course of revision.



in the case of the Braintree Rural District Council and no estimate of the number of years required for the demolition or other suitable treatment of the remaining houses unfit for human habitation being available in the case of the Tendring Rural District Council. Progress, however, compares favourably with that made in 1959. The Dunmow Rural District Council head the list as regards demolition and the Lexden and Winstree Rural District Council as regards rendering fit, and there would appear to be good grounds for believing that, in all but one or two cases, programmes will have been completed within the next five years.

Improvement grants, administered by the local housing authorities, are payable to private owners to assist in the rendering of houses fit for human habitation to modern standards and the provision of housing accommodation by the conversion of buildings. Such grants are made under the provisions of the Housing (Financial Provisions) Act, 1958, or the House Purchase and Housing Act, 1959, being discretionary in the first instance, and standard in the second. Details of the progress of the rural authorities in this aspect of housing are shown in Table VIII on page 104 from which it will be seen, as noted in 1959, that the activities of the Chelmsford Rural District Council are outstanding. The largest sum expended in this way up to and including 1960, viz., £198,500, is to the credit of this authority. In each case there is a marked increase in the number of applications made and grants paid under the House Purchase and Housing Act, 1959, totalling £20,650 in 1960 as against £942 in 1959.

Particulars of house building activities during the year are shown in Table IX on page 105. Each rural authority played a part, the Lexden and Winstree Rural District Council taking the lead from the Chelmsford Rural District Council, with, in total, a small increase over last year's figures.

Private residential development shows marked increases over last year's figures in the case of the Chelmsford and Tendring Rural Districts but the largest building activity is still in the area of the Rochford Rural District. It now greatly exceeds local authority development.

Bearing in mind the probability of differing interpretations of the term "urgent need" and some degree of approximation in all but the smaller totals, the numbers of persons within this category of housing has decreased in several instances particularly noticeable in those of the Chelmsford and Rochford Rural Districts.

### ESTABLISHMENTS FOR MASSAGE OR SPECIAL TREATMENT

Part IV of the Essex County Council Act, 1933, requires that no person shall, in a county district in which that part of the Act is in force, carry on an establishment for massage or special treatment without a licence permitting him to do so.

Over the years, the number of licences granted has steadily increased. During 1960, 8 licences were granted and 84 were renewed. The staff paid 196 visits in connection with these establishments.

### SECTION III—THE CARE OF MOTHERS AND YOUNG CHILDREN

#### Child Welfare Centres

At the end of the year, the County Council were providing a total of 258 child welfare centres, this being an increase of nine over the total for 1959.

During the year the following changes took place :—

#### *New Centres opened :*

Bockings Elm, Clacton-on-Sea  
 Greenstead Estate, Colchester  
 School Room, Barnston, near Dunmow  
 Melbourne Avenue, Chelmsford  
 Memorial Hall, South Green, Billericay  
 Kingswood Baptist Church Hall, Basildon  
 Congregational Church Hall, Hornchurch  
 Old Primary School, Little Warley  
 South Weald Parish Hall, Brentwood  
 The Drive, Loughton  
 Kenwood Gardens, Ilford  
 The Drive, Ilford  
 Heathcote Health Services Clinic, Heathcote Avenue, Ilford  
 Fairlop Child Welfare Centre, Mossford Lane, Ilford

#### *Centres discontinued :*

Boarded Barns Child Welfare Centre, Chelmsford  
 Union Church Hall, Loughton  
 Barkingside Child Welfare Centre, Mossford Lane, Ilford  
 Woodford Avenue, Ilford  
 Valentines Mansion, Emerson Road, Ilford  
 St. Michael's Church Hall, Rayleigh

#### Distribution of Welfare Foods

In order to provide as adequate a service as possible, 460 distribution points (171 at child welfare centres and 289 at other premises) were operating during 1960.



The quantities of welfare foods, including National Dried Milk, distributed to beneficiaries during 1960 as compared with the previous year were :—

	1959	1960
Orange Juice and Vitamin C bottles .....	1,030,942	1,020,084
Vitamins A and D tablets, packets .....	95,614	103,819
Cod Liver Oil (Vitamins A and D) bottles	101,024	104,533
National Dried Milk, tins .....	511,117	448,371

Despite the usual substantial increase in the total population of the Administrative County there was, as will be seen from these figures, a decrease of 62,746 in the number of tins of National Dried Milk, and of 10,858 bottles of orange juice issued. On the other hand there were increases of 8,205 packets and 3,509 bottles respectively of Vitamin A and D tablets, and Cod Liver Oil (Vitamins A and D) issued.

If, however, these figures are looked at in the light of the issues of welfare foods during 1957, it is seen that there have been the following substantial decreases over the four years :—

Orange Juice and Vitamin C bottles .....	625,217
Cod Liver Oil (Vitamins A and D) bottles .....	56,145
National Dried Milk tins .....	73,615

During the same period, the population of the Administrative County, as estimated by the Registrar-General, has increased by 73,615 which suggests that the overall uptake of Welfare Foods has fallen to an extent in excess of that shown by the fall in the actual issues.

### Medicaments and Nutriment

During 1960, the arrangements whereby, on the recommendation of a medical officer, approved medicaments, free of charge, and nutriment at reduced prices, are made available to mothers and children at Child Welfare Centres were continued. Area Medical Officers were, however, advised that, where the demand for any additional nutriment warranted sale from the Centres, it would be reasonable to extend the approved list of issues accordingly.

### Dental Inspection and Treatment

The report of the Chief Dental Officer on the work of the County



Dental Service appears on page 90. Dental treatment provided for expectant and nursing mothers and young children during the years 1959 and 1960 was as follows :—

	Expectant and Nursing Mothers		Children under five years of age	
	1959	1960	1959	1960
(a) Numbers provided with dental care :—				
Examined .....	1,487	1,359	2,424	2,350
Needing treatment .....	1,336	1,244	2,026	1,923
Treated .....	1,360	1,251	2,029	1,818
Made dentally fit .....	890	895	1,432	1,410
(b) Forms of dental treatment provided :—				
Extractions .....	1,788	1,869	1,672	1,392
Anæsthetics :—				
Local .....	809	791	99	80
General .....	283	214	782	607
Fillings .....	1,842	1,714	2,354	2,374
Scalings and gum treatment .....	599	532	148	19
Silver Nitrate treatment .....	26	32	1,051	892
Dressings .....	653	566	716	577
Radiographs .....	54	62	2	2
Dentures provided :—				
Fuller upper or lower .....	116	116	—	—
Partial upper or lower .....	154	108	—	—
Crowns and Inlays .....	11	—	—	—

### Detection and Treatment of Phenylpyruvic Oligophrenia

The arrangements for the detection and treatment of phenylpyruvic oligophrenia, which were extended to the whole of the Administrative County during 1959, were continued. Tests were carried out on the urine of 22,751 children and, of these, two were found to be positive and were admitted to hospital for investigation.

## Day Nurseries

At the beginning of 1960, the County Council were providing 20 day nurseries with accommodation in all for a total of 966 children. The Kingsley Hall Day Nursery was closed as such in February and was re-opened in May as an assessment centre for handicapped children under school age. For the remainder of the year the 19 day nurseries provided accommodation for 886 children.

During the autumn a serious outbreak of fire occurred at the Brook Street Day Nursery, Colchester but attendances of the children in the priority categories of admission were not affected to any great extent because it was possible, with the co-operation of all the staff concerned, to divert urgent priority cases together with the appropriate staff to the Sheepen Road Day Nursery. Despite overcrowding, this arrangement worked well.

Thereafter, with the full co-operation of the North-East Essex Divisional Executive and the concurrence of the Education Committee, arrangements were made for the temporary transfer of the Brook Street Nursery to the Greyfriars School, East Hill, Colchester. At the end of the year, this transfer had been completed satisfactorily.

## Daily Guardians Scheme

The number of registered daily guardians and the number of children being cared for at the end of 1960 was as follows :—

<i>Health Area</i>	<i>Daily Guardians</i>	<i>Children being cared for</i>
Forest .....	4 (3)	2 (2)
Dagenham .....	85 (152)	51 (73)
Walthamstow .....	19 (20)	4 (3)
	108 (175)	57 (78)

*Note : The figures in parenthesis relate to 1959*

## Nurseries and Child Minders Regulation Act, 1948

The following table shows the number of premises and child minders registered by the County Council in accordance with the requirements of the Nurseries and Child Minders Regulation Act, 1948 and the number of children for whom provision was made at the end of 1960, together with comparable figures for 1959 :—

Health Area	NURSERIES				CHILD MINDERS			
	Number Registered		Number of Children provided for		Number Registered		Number of Children provided for	
	1959	1960	1959	1960	1959	1960	1959	1960
North-East Essex	4	5	91	103	3	5	14	24
Mid-Essex .....	1	1	6	6	1	5	8	65
South-East Essex	3	1	20	9	1	8	3	72
South Essex .....	7	13	166	366	9	8	33	46
Forest .....	14	13	316	299	17	16	80	75
Romford .....	1	1	12	—	2	3	20	23
Barking .....	—	—	—	—	—	—	—	—
Dagenham .....	—	—	—	—	3	3	22	22
Ilford .....	7	7	158	214	4	5	24	28
Leyton .....	—	—	—	—	1	3	3	9
Walthamstow .....	1	2	16	56	—	—	—	—
<b>TOTAL .....</b>	<b>38</b>	<b>43</b>	<b>785</b>	<b>1,053</b>	<b>41</b>	<b>56</b>	<b>207</b>	<b>364</b>

### Child Guidance

Following receipt of Ministry of Health Circular 3/59 dated 10th March, 1959, consideration was given to the arrangements to be made for child guidance clinic teams to advise the staff of child welfare clinics on such problems of emotional development and behaviour difficulties as they may encounter in their contacts with mothers and young children. In this connection there has been, since the Child Guidance Service was set up in 1950, a considerable measure of co-operation and this is being extended on the lines suggested in the Circular.

It was not possible owing to the shortage of child psychiatrists to provide the required extra psychiatric sessions during 1960 but it is hoped that it may be possible to do so in the reasonably near future.

### Convalescent Facilities

Arrangements were made during the year for 29 mothers and 48 children to have recuperative holidays.

### Kingsley Hall Day Centre for Handicapped Children

In May, 1960 this Centre was opened for a trial period of one year as an assessment centre for children under five years of age with varying disabilities. The premises which had previously been used as a day nursery, were adapted to meet the particular needs of the children and structural alterations (including re-laying of floors) were carried out.



Twenty children were admitted to the Centre and the average attendance fluctuated between 15 and 18. A full report on the results obtained during the trial period will be published in the next Report.

## CHILDREN ACT, 1948

### Residential Accommodation

Routine visits of inspection were made to three residential nurseries in the Administrative County in the company of the Children's Officer.

### Boarded-out Children

Arrangements continued for the examination of boarded-out children and, in this connection, 967 children were examined of whom 141 were found to require treatment. In each case the Area Medical Officer concerned was informed of the findings.

As has been the practice in the past, the majority of these examinations were undertaken by general medical practitioners although some examinations were undertaken at County Health Services Clinics by Assistant County Medical Officers.

## SECTION IV—THE MIDWIFERY, HOME NURSING AND HEALTH VISITING SERVICES

### MIDWIFERY SERVICE

The numbers of midwives who notified their intention to practise in accordance with the provisions of the Midwives Act, 1951 are given below :—

<i>Form of practice</i>	<i>Domiciliary Midwives</i>	<i>Midwives in Institutions</i>	<i>Total</i>
(a) Midwives employed by the Authority .....	279	—	279
(b) Midwives employed by Voluntary Organisations (including Hospitals not transferred to the Minister under the National Health Service Act) .....	—	7*	7*
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act :—			
(i) Under arrangements with the Local Health Authority .....	3	—	3
(ii) Otherwise .....	—	257	257
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)	4	5	9
Totals .....	286	269	555

\* Including five midwives at the Military Hospital, Colchester

Midwives employed by the County Council attended 11,081 deliveries (345 more than in 1959), no doctor being present in 8,755 cases.

The total number of births notified under Section 203 of the Public Health Act, 1936 was 30,412 (1,484 more than in 1959) and, of these, 61.8 per cent occurred in hospital. The percentage of hospital confinements in each Health Area was as follows :—

			1959	1960
North-East Essex	.....	.....	69.4	72.3
Mid-Essex	.....	.....	64.8	62.7
South-East Essex	.....	.....	48.2	47.6
South Essex	.....	.....	56.0	55.4
Forest	.....	.....	59.3	60.6
Romford	.....	.....	54.4	53.9
Barking	.....	.....	73.2	69.3
Dagenham	.....	.....	62.7	62.5
Ilford	.....	.....	73.3	73.9
Leyton	.....	.....	79.8	79.2
Walthamstow	.....	.....	73.3	70.6

It continued to be difficult to maintain an adequate number of domiciliary midwives despite such inducements (including housing and motor transport) as the Council were able to make available.

The arrangements referred to in earlier Reports whereby midwives worked in pairs or small groups, continued to be satisfactory. No night rota system was in operation but some Health Areas arranged for part-time midwives to take over the morning calls of a midwife who had been called out the previous night.

### Analgesia

All but 5 (i.e. over 98 per cent) of the midwives employed by the Council were qualified to administer inhalational analgesia in accordance with the requirements of the Central Midwives Board. Such analgesia was administered to 83 per cent of the women confined at home : this was 1 per cent more than in 1959.

### Ante-Natal and Post-Natal Clinics

The number of women who attended ante-natal and post-natal clinics and the total number of attendances have been well maintained over the past few years as is shown below :—

	Number of women in attendance		Total number of attendances during the year	
	Number of women who attended during the year	Number of new cases included in previous column	Medical Officers' sessions	Midwives' sessions *
For ante-natal examination :—				
1960 .....	13,984	10,693	42,131	33,486
1959 .....	13,686	10,755	42,490	30,303
1958 .....	14,007	10,736	45,481	29,082
1957 .....	14,674	9,852	46,852	26,740
For post-natal examination :—				
1960 .....	3,239	3,227	3,780	—
1959 .....	3,231	3,176	3,864	—
1958 .....	3,313	3,194	3,820	—
1957 .....	3,379	3,235	3,867	—

\* i.e. where no medical officer was present

### Puerperal Pyrexia

The number of notifications of puerperal pyrexia (any febrile condition occurring in a woman in whom a temperature of 100.4°F. or more has occurred within fourteen days after childbirth or miscarriage) was less than at any time since the present Puerperal Pyrexia Regulations came into operation in 1951. Of the 290 notifications received, only 38 were in respect of domiciliary confinements.

### Ophthalmia Neonatorum

There were 27 cases of ophthalmia neonatorum, an increase of seven over the previous year but, so far as is known, no impairment of vision resulted in any of these cases.

### Maternal Deaths

The number of deaths ascribed to pregnancy, childbirth or abortion was six, a decrease of two over the previous year. The maternal mortality rate was thus 0.20 per thousand live births which was the lowest ever recorded in Essex. The national rate was 0.39.

A detailed report on each of these deaths was sent to the Regional Assessor in accordance with arrangements made by the Ministry of Health.

### Care of Unmarried Mothers and their Babies

The Chelmsford Diocesan Moral Welfare Association continued to be responsible, on an agency basis, for the care of unmarried mothers and their



babies. The annual contribution made by the Council to the Association was increased from 75 to 85 per cent of the approved expenditure from the Association's Central Fund in order to assist the Association to purchase new properties and to effect improvements to accommodation provided at their existing homes. As a result, the Hostel of the Good Shepherd, Colchester was greatly improved and refurnished; Sunnedon House, Coggeshall was closed and adaptations to new premises in Warley Hill, Brentwood were put in hand. Difficulties arose regarding planning permission for the adaptations proposed for St. Faith's, Loughton and consideration was being given at the end of the year to the possibility of acquiring other premises in this area.

The number of mothers admitted to the hostels fell from 310 in 1959 to 273 in 1960 and the average length of stay (six weeks before and five weeks after confinement) remained the same.

### **Training of Pupil Midwives**

The Training Homes continued to provide facilities for pupil midwives to prepare for Part II of the Certificate of the Central Midwives Board and 105 were trained under these arrangements. Similarly, pupils employed by various Hospital Management Committees were afforded opportunity to acquire district experience but it became increasingly difficult to find suitable residential accommodation for these pupils.

## **HOME NURSING SERVICE**

### **Training of Staff**

Following the Report of the Advisory Committee on the Training of District Nurses, the Minister of Health approved two alternative schemes submitted by the Queen's Institute of District Nursing for :—

- (a) a 4 months' course (for State Registered Nurses with additional qualifications or experience) or a 6 months' course ; and
- (b) a 3 months' course (for State Registered Nurses with additional qualifications or experience) or a 4 months' course.

The Council thereupon decided, rather than to set up their own scheme of training, to continue to train district nurses under the auspices of the Queen's Institute of District Nursing for a further period of two years and to reconsider the matter at the end of that time. It was also decided that the Institute's syllabus for the shorter course of training, referred to at (b) above, should be adopted. The first of these courses had almost been completed by the end of the year.

A total of 26 nurses completed a course of Queen's district training at the Council's training homes and, of these, 7 were trained under arrangements made with other authorities.

### Arrangements with West Ham County Borough Council

Arrangements have been in operation since 1948 whereby the County Council provide, on behalf of the County Borough of West Ham, nursing and midwifery services in part of their area similar to those made available before 5th July, 1948 by the Essex County Nursing Association.

Following a review of their arrangements, the County Borough Council indicated that they desired to take over the home nursing service on a phased basis and that, as a first stage, when suitable vacancies arose, nurses in their employ should commence to undertake home nursing duties in the seven districts within the County Borough covered by staff operating from the County Council's training homes. Responsibility for the first of these districts was transferred to the County Borough Council on 1st October, 1960, and discussions were taking place at the end of the year regarding the transfer of the remaining districts.

### Statistics

The number of patients treated fell from 26,145 in 1959 to 25,987 in 1960, but the total number of visits paid rose from 638,751 to 649,046. The following table gives particulars of the number of patients treated and visits paid, according to category, during each of the past three years.

Category of Case	No. of Cases attended by Home Nurses during—			No. of Visits paid by Home Nurses during—		
	1958	1959	1960	1958	1959	1960
Medical .....	20,024	18,192	17,482	490,841	467,494	471,048
Surgical .....	5,200	6,247	6,817	127,723	136,524	146,312
Infectious Disease .....	207	176	185	2,539	2,050	1,928
Tuberculosis .....	392	387	377	19,367	20,374	17,933
Maternal Complica- tions	419	484	413	3,406	3,737	3,163
Others .....	586	659	713	6,632	8,572	8,662
<b>Totals</b> .....	<b>26,828</b>	<b>26,145</b>	<b>25,987</b>	<b>650,508</b>	<b>638,751</b>	<b>649,046</b>

## HEALTH VISITING

### Staff

At the end of the year, there were 228 full-time and 26 part-time health visitors and tuberculosis visitors employed as compared with 237 and 44 respectively at the end of 1959.



Following the joint advice of the Ministers of Health and Education that the work of the health visitor should be broadly based, should extend to the whole family and that there were advantages to be gained by families and the service as a whole by health visitors combining work in both the maternity and child welfare and school health services, the County Council decided that the designation "school nurse" should not be perpetuated and that 46 such posts should be redesignated "health visitor" and transferred to the staff establishment of the Health Department.

By the creation of 10 additional posts of health visitor, further provision was made towards an eventual establishment of one whole-time health visitor for every 4,000 of the population which was envisaged in the Council's approved Proposals under Section 24 of the National Health Service Act, 1946. This standard cannot be attained at present but the 10 additional appointments will result in a minimum ratio of 1 whole-time health visitor for every 6,000 population throughout the Administrative County.

Sixteen student health visitors completed their training in 1960 at the Health Visitors' Training Course held at the South-East Essex Technical College, Dagenham. At the end of the year 15 other students were in training. With the increasing emphasis on the prevention of mental disorder and the care and after-care of persons suffering from mental disorder, arrangements have been made for student health visitors to spend 6 weeks of their practical training at a psychiatric hospital. Thanks are due to the Physician Superintendent of Goodmayes Hospital for making these arrangements possible.

Students preparing for the examination of the Royal College of Nursing in Public Health Nursing Administration were again given practical experience in various parts of the County.

### **Mothercraft and Relaxation Courses**

Health visitors continued to provide courses in mothercraft and relaxation at various centres throughout Essex. The courses were run by health visitors who had themselves received special instruction in these subjects and they usually consisted of six to eight sessions, at one of which a demonstration on the use of gas and air machines was given by a midwife.

In order to enable individual attention to be given, the courses were deliberately confined to small numbers, usually of between eight to ten persons. Talks and demonstrations were given on breathing, exercises, relaxation and mothercraft, including advice on diet, breast feeding and babies' clothes. The talks were frequently supported by films and film strips and the discussion held at the end of each mothercraft session afforded an opportunity for the consideration of individual problems.



## Statistics

A total of 352,612 visits were made by health visitors during 1960, an increase of 11,671 over those made in 1959. The following gives particulars, according to category, for each of the past two years :—

	1959	1960
Expectant mothers .....	9,047	9,739
Children under 1 year .....	105,942	114,003
Children aged 1 and under 2 years .....	49,980	51,069
Children aged 2 and under 5 years .....	85,884	88,503
Tuberculosis households .....	5,385	4,554
Old persons } .....	42,068	19,790
Other cases } .....		23,111
Ineffective visits .....	42,635	<b>41,443</b>

## SECTION V—PREVENTIVE MEDICINE, CARE AND AFTER-CARE

### TUBERCULOSIS

#### Notifications

During 1960, the number of primary notifications of tuberculosis received was 749 as compared with 707 in 1959 ; 848 in 1958 ; 965 in 1957 ; 960 in 1956 ; 972 in 1955 and 1,175 in 1954.

Details of the notifications of respiratory and non-respiratory tuberculosis in 1960 are shown in the following table :—

	Sex	Under 1 year	1-2 years	2-5 years	5-10 years	10-20 years	20-25 years	25-35 years	35-45 years	45-55 years	55-65 years	65-75 years	Over 75 years	Total (all ages)
Respira- tory	M	1	4	6	8	6	23	71	72	66	75	39	19	401
	F	1	2	8	2	15	41	62	54	22	18	9	4	261
Non- respira- tory	M	—	—	1	4	4	6	10	9	5	2	3	—	46
	F	—	—	1	3	5	7	7	1	2	3	5	1	41

Notifications other than by formal notification were :—

Source of information		Sex	Under 1 year	1-15 years	15-20 years	20-25 years	25-35 years	35-45 years	45-55 years	55-65 years	65-75 years	Over 75	Total (all ages)
Death returns from local Registrar	Respiratory	M	—	—	—	—	—	—	3	5	6	5	19
		F	—	—	—	1	—	—	—	1	1	1	4
	Non-Respiratory	M	—	—	—	—	—	—	—	—	—	—	—
		F	—	—	—	—	—	—	—	—	1	—	1
Death returns from Registrar General (Transferable deaths)	Respiratory	M	—	—	—	—	—	—	—	2	3	1	6
		F	—	—	—	—	—	—	1	—	2	—	3
	Non-Respiratory	M	—	—	—	—	—	—	—	—	—	—	—
		F	—	—	—	—	—	—	—	—	—	—	—
Posthumous Notifications	Respiratory	M	—	—	—	—	—	—	—	—	2	2	4
		F	—	—	—	—	—	—	—	—	1	1	2
	Non-Respiratory	M	—	—	—	—	—	—	—	—	—	—	—
		F	—	—	—	—	—	1	—	1	—	—	2

### Notification and Death Rates

The following table shows the number of primary notifications of tuberculosis and the number of deaths attributed to the disease, together with the annual notification and death rates in each quinquennium since 1920 and for individual years since 1956 :—

	Respiratory Tuberculosis				Non-Respiratory Tuberculosis				Tuberculosis (all forms)			
	Notifica-tions		Deaths		Notifica-tions		Deaths		Notifica-tions		Deaths	
	No.	Rate*	No.	Rate*	No.	Rate*	No.	Rate*	No.	Rate*	No.	Rate*
1920-24	4,904	1.07	3,212	0.70	1,322	0.29	789	0.17	6,226	1.36	4,001	0.87
1925-29	5,626	1.09	3,376	0.65	1,853	0.36	704	0.14	7,479	1.45	4,080	0.79
1930-34	6,005	0.97	3,498	0.57	2,122	0.34	705	0.11	8,127	1.32	4,203	0.68
1935-39	5,521	0.81	3,015	0.44	1,783	0.26	577	0.08	7,304	1.07	3,592	0.53
1940-44	6,507	1.02	3,081	0.48	1,859	0.29	592	0.09	8,366	1.31	3,673	0.58
1945-49	6,952	0.95	2,674	0.37	1,381	0.19	404	0.06	8,333	1.14	3,078	0.42
1949-54	6,293	0.77	1,448	0.18	879	0.11	174	0.02	7,172	0.88	1,622	0.20
1955-59	3,915	0.45	630	0.07	537	0.06	80	0.01	4,452	0.51	710	0.08
1956	848	0.49	126	0.07	112	0.06	15	0.01	960	0.56	141	0.08
1957	841	0.48	134	0.08	124	0.07	14	0.01	965	0.55	148	0.08
1958	746	0.42	124	0.07	102	0.06	14	0.01	848	0.48	138	0.08
1959	646	0.36	106	0.06	61	0.03	8	0.00	707	0.39	114	0.06
1960	662	0.36	106	0.06	87	0.05	12	0.01	749	0.41	118	0.06

\* Rate per 1,000 population



## Domiciliary Visits

Health Visitors and Tuberculosis Visitors continued to share the duties of visiting tuberculous patients in their own homes in order to give them advice and guidance. The closest possible co-operation was maintained with the Chest Physicians whilst the Tuberculosis Visitors attended Chest Clinic Sessions regularly and health visitors visited these clinics at intervals in order to discuss with the Chest Physicians the needs of their patients.

### Summary of work carried out by the Health Visitor/Tuberculosis Visitors during 1960

Health Area	No. tuberculous households at 31.12.60	Visits to Households		Sessions attended at Chest Clinic	
		Tuberculosis Visitors	Health Visitors	Tuberculosis Visitors	Health Visitors
North-East Essex .....	846	38	707	153	59
Mid-Essex .....	921	—	2,437	—	403
South-East Essex .....	985	—	946	—	280
South Essex .....	2,316	7,287	214	747	12
Forest .....	1,762	2,753	195	656	27
Romford .....	1,049	4,680	—	372	—
Barking .....	759	3,190	—	312	—
Dagenham .....	753	3,135	25	298	—
Ilford .....	1,265	2,428	18	473	—
Leyton .....	744	2,209	—	357	—
Walthamstow .....	1,026	1,225	12	693	—
<b>Total .....</b>	<b>12,426</b>	<b>26,945</b>	<b>4,554</b>	<b>4,061</b>	<b>781</b>

The total number of patients on the Chest Clinic registers at the end of 1960 was 12,867, compared with 13,502 at the end of 1959.

## Follow-up of Contacts

During 1960 there were 662 cases of respiratory tuberculosis notified, this being an increase of 16 over the figure for 1959. Contacts examined for the first time numbered 3,936.

## Open-Air Shelters

At the end of 1960, there were only 13 open-air shelters being used by persons suffering from tuberculosis, this being three less than the number in use at the end of the previous year. This gradual reduction in the number of these shelters being used seems to reflect the tendency for them to be used by the long-standing chronic cases and not by the newly notified cases.

## B.C.G. Vaccination

The scheme for the vaccination of Mantoux negative contacts of patients suffering from respiratory tuberculosis, which was commenced in 1951, was continued during 1960. The number of contacts who were skin tested during the year showed a reduction over the figure for the previous year.

Details of the work undertaken are as follows :—

	1959	1960
Number of contacts skin tested .....	2,998	2,623
Number of contacts found to be negative	2,260	2,049
Number of contacts vaccinated .....	1,924	1,826

The arrangements for the vaccination of school children of 13 years of age and upwards and of students attending universities, teacher training colleges, technical colleges or other establishments of further education were also continued during 1960.

Details concerning these vaccinations are as follows :—

	1959	1960
(1) Number of pupils and students skin tested	13,647	20,348
(2) Number of pupils and students undergoing tuberculin tests—		
Positive result .....	1,300	1,928
Negative result .....	11,956	17,898
Vaccinated with B.C.G. ....	11,679	17,750

As a result of the use of British freeze-dried B.C.G. vaccine during the experimental period referred to in the Report for 1959, it was agreed to extend the use of this type of vaccine by giving to the Area Medical Officers the choice of using either freeze-dried or liquid vaccine.

## Occupational Therapy for the Tuberculous

The arrangements were continued whereby patients suffering from tuberculosis and residing in the Romford, Barking Dagenham and Ilford Health Areas and in parts of the South Essex and Forest Health Areas were provided with occupational therapy by a full-time Occupational Therapist.

The agency arrangements with the British Red Cross Society, whereby tuberculous patients in other parts of the Administrative County were provided



with occupational therapy by therapists employed by that Society, ceased on 31st March, 1960.

At the end of 1960, 50 patients were making use of the facilities for occupational therapy and in all 58 new patients were visited during the year.

### **Extra Nourishment**

The scheme for the provision of one pint of milk a day, free of charge, to those tuberculous patients recommended by Chest Physicians for this form of extra nourishment continued and, at the end of the year, 1,404 patients were receiving milk. This was a decrease of 42 on the figure for the previous year.

### **Rehabilitation**

One new patient, for whose maintenance the County Council accepted financial responsibility, was admitted to the British Legion Settlement, Preston Hall, Maidstone, during 1960; four patients were already being maintained there or at Papworth Village Settlement, Cambridge.

### **Mass Miniature Radiography**

Three mobile mass radiography units of the North-East Metropolitan Regional Hospital Board covered that part of the Administrative County which lies within the Board's catchment area and in all 77 sites were visited. According to the returns made available by the Regional Hospital Board, 90,827 persons were x-rayed of whom 46,994 were males and 43,833 were females.

The units held sessions for the general public, schools, hospitals and factory staffs.

### **Books for Tuberculous Patients**

The arrangements were continued whereby, in return for the grant made by the County Council, patients suffering from tuberculosis and residing in their own homes were able to borrow books from the Hospital Library Service set up by the Joint Committee of the British Red Cross Society and the Order of St. John of Jerusalem. Under these arrangements, six patients borrowed 216 books.

### **Tuberculosis Care Associations**

Grants totalling £6,641 were made by the County Council to 18 Voluntary Tuberculosis Care Associations which cover the whole of the Administrative County. The total income of the Associations was £11,974, a reduction of £1,647 in the income of the previous year.

These grants were made on the basis of £2 per 1,000 population served, up to £25 for petty cash disbursements (mainly postages), and a proportion of £2,800 made available by the Licensing of Places of Public Entertainment Committee from the Sunday Cinema Fund.

The total expenditure of the Associations during the twelve months ended 30th November, 1960, was £12,096, as compared with £12,361 during the previous year.

The following details indicate the way this money was used in helping tuberculous patients and their families.

	£
Milk and groceries .....	7,745
Fuel .....	369
Fares .....	669
Clothing, furniture, etc. ....	492
Holidays, outings, etc. ....	402
Diversional therapy .....	20
Other grants .....	1,207
Special efforts .....	597
Printing, postages, etc. ....	606

### OTHER ILLNESSES

#### Recuperative Convalescence

The arrangements made under Section 28 of the National Health Service Act, 1946, whereby patients recovering from illness who are not considered to be in need of further medical or nursing attention may be granted two or three weeks' recuperative holiday at suitable convalescent homes, were continued. In all, 592 patients were provided with recuperative holidays. The standard charge made by the County Council was £3 18s. 2d. a week but this was subject to a reduction in necessitous cases. In cases where the payment of fares by the patients would have caused hardship, travel vouchers covering second class return fares were issued.

#### Loan of Sick Room equipment

The arrangements for the loan of sick room equipment for the use of patients being nursed in their own homes and for the provision of fireguards on loan to families having one or more children under the age of twelve years, or elderly or handicapped persons, were continued.

### INFECTIOUS DISEASES

The total number of infectious and other notifiable diseases notified during the year was 14,218 as compared with 37,109 in 1959 and 14,910 in 1958. This very large variation in numbers was due almost entirely to the fluctuation in the incidence of measles. Details concerning the notifications will be found in Table IV at the end of this Report.

### PUBLIC HEALTH (AIRCRAFT) REGULATIONS, 1952 AND 1954

The arrangements made in accordance with the requirements of the Public Health (Aircraft) Regulations, 1952 and 1954, whereby Assistant County



Medical Officers undertake standby duty on a rota basis to carry out routine health control at Stansted Airport, continued satisfactorily during 1960.

## VACCINATION AND IMMUNISATION

### Smallpox

There were no notifications of smallpox in 1960. Details of the vaccinations and re-vaccinations against the disease are shown in the following table :—

Age at date of vaccination	Under 1 year	1·2 years	2·4 years	5·14 years	15 years and over	Total
Number vaccinated .....	14,590 (14,496)	1,376 (1,231)	932 (819)	1,140 (1,096)	1,523 (1,559)	19,561 (19,651)
Number re-vaccinated .....	36 (18)	18 (22)	188 (326)	723 (532)	4,288 (3,786)	5,253 (4,684)

Note : Figures in parenthesis relate to 1959

Information relating to the infant acceptance rate, re-vaccinations completed per thousand population and the numbers of vaccinations and re-vaccinations carried out in the Health Areas in 1960 is shown below :—

Health Area	Number vaccinated	Number re-vaccinated	Infant Acceptance Rate		Re-vaccina- tions per 1,000 population
			1955-59	1960	
North-East Essex .....	1,930	651	45.9	56.9	3.3
Mid-Essex .....	2,606	897	49.2	56.1	3.8
South-East Essex .....	2,586	322	43.8	52.3	1.8
South Essex .....	3,691	892	46.5	57.0	3.2
Forest .....	3,116	879	52.3	57.8	3.4
Romford .....	933	408	29.6	26.7	3.5
Barking .....	299	126	20.7	11.8	1.7
Dagenham .....	915	206	37.9	63.0	1.8
Ilford .....	1,640	485	46.8	46.0	2.7
Leyton .....	869	146	44.9	64.3	1.5
Walthamstow .....	976	241	43.7	44.2	2.2
Administrative County	19,561	5,253	44.4	51.9	2.8

## Poliomyelitis

The scheme for vaccination against poliomyelitis was extended during 1960 to allow the offer of vaccination to be made to all persons who had not, at the time of their application for vaccination, reached the age of 40 years and also to the following :—

- (a) Persons going to visit or reside in a country outside Europe, other than Canada or the United States of America.
- (b) Practising dental surgeons, dental students, dental hygienists, student hygienists, dental surgeons, chairside assistants and their families.
- (c) Practising nurses not working in hospitals (those working in hospital were already eligible) and their families.
- (d) Public health staff who might come into contact with poliomyelitis cases and their families.

Two injections for vaccination against poliomyelitis were given to :—

(a) Children born in the years 1943 to 1960	.....	35,074
(b) Young persons born in the years 1933 to 1942	.....	13,902
(c) Persons born before 1933 who have not passed their fortieth birthday	..... .....	56,156
(d) Others	..... .....	2,756
(e) Total persons vaccinated	..... .....	107,777

In addition, 170,967 persons received a third injection.

## Diphtheria

It is with regret that I have to report an outbreak of diphtheria which occurred in Walthamstow during January, 1960, and which resulted in five clinical cases with one death, and the discovery of 74 carriers. The death was of a child under school age who had not been immunised against the disease.

The table which follows gives details of the number of children, by age group, who at the end of the year had been immunised against diphtheria, and of the "immunity index" which is calculated by dividing the number of children protected either by primary or reinforcing dose in the period 1956 to 1960 inclusive by the estimated population figure. It will be seen from the table that no less than 150,449 children had not, at the end of the year, received the reinforcing doses which they required in order to maintain their immunity.



Age on 31.12.1960 (i.e. born in year)	Under 1 year 1960	1—4 years 1956-59	5—9 years 1951-55	10—14 years 1946-50	Under 15 years Total
A. No. of children whose last course (primary or "booster"), was completed in the period 1956-60	7,022	80,098	76,363	32,303	195,786
B. No. of children whose last course (primary or "booster"), was completed in the period 1955 or earlier	—	—	45,588	104,861	150,449
C. Estimated mid-year child population	28,400	116,400	291,600		436,000
Immunity Index .....	24.7	68.8	37.33		44.9

### Whooping Cough

Immunisation against whooping cough was carried out both by general medical practitioners, to whom vaccine was provided free of charge, and by the County Council's medical staff. Under these arrangements, 15,377 children were immunised, this being 11 more than in the previous year.

The following table gives details of the primary inoculations carried out :—

Children aged				Total (all ages)
Under 6 months	6—12 months	1—4 years	5 years and over	
7,142	6,272	1,640	323	15,377

In addition to these primary inoculations, 2,772 children received reinforcing injections.

Some general medical practitioners practising in the County favour the use of combined diphtheria/pertussis vaccine and in all 10,828 children were immunised with this type of vaccine. Information relating to these immunisations is given in the following table :—

Children aged				Total (all ages)
Under 6 months	6—12 months	1—4 years	5 years and over	
3,338	5,060	1,940	490	10,828

General medical practitioners also gave reinforcing injections with combined vaccine to 3,509 children.

### Yellow Fever

Arrangements were made for the provision by the County Council, from 1st July, 1960, of yellow fever vaccination at the Clinic, Coval Lane, Chelmsford.

This Clinic has been designated by the Minister of Health, for the purposes of the International Sanitary Regulations, as a Centre for the provision of a yellow fever vaccination service and the necessary amendment of the Council's approved Proposals under Section 28 of the National Health Service Act, 1946 was obtained.

Vaccinations are carried out at the Centre on payment of a charge of £1 1s. 0d. for each vaccination, this charge being subject to abatement in accordance with the Council's Assessment Scales in the case of persons normally resident in the Administrative County. The vaccinations are carried out by appointment and these are usually arranged for Tuesday or Friday afternoons with the exception of public holidays.

During the six months ended 31st December, 1960, 16 vaccinations were carried out.

### ESSEX EPIDEMIOLOGICAL COMMITTEE

There was no meeting of the Essex Epidemiological Committee during the year under review.

### VENEREAL DISEASE

The returns submitted from Special Clinics in respect of patients attending during 1960 showed that there were 46 new cases of syphilis and 395 new cases of gonorrhoea.

The following table shows the numbers of cases notified during the last five years :—

	1956	1957	1958	1959	1960
Syphilis .....	86	104	107	67	66
Gonorrhœa .....	211	236	267	357	395

The following table gives an analysis of the new cases according to Clinics at which the diagnosis was made :—

Place of Diagnosis	Syphilis	Gonorrhœa	Other Conditions
Essex .....	41	163	1,152
London .....	19	179	934
Elsewhere .....	6	53	390



The tracing of contacts of venereal disease continued to be carried out partly by social workers, attached to the clinics, and particularly in the rural areas, partly by Superintendent Health Visitors.

## HEALTH EDUCATION

### Lectures

Some 4,435 lectures, on a wide variety of subjects relating to all aspects of health education were delivered in the year under review to :—

Youth Groups	.....	.....	.....	.....	91
Schools	.....	.....	.....	.....	751
Adult Groups	.....	.....	.....	.....	386
Clinic audiences	.....	.....	.....	.....	3,207

Generally, the opportunity was taken after these lectures to answer the many questions arising and general discussion was welcomed.

### Film Shows

During the year, 510 film shows were presented when 1,038 films were shown to various types of audiences.

The arrangements continued whereby a variety of films, not held in the central film library, were obtained on loan from statutory and voluntary bodies and from commercial undertakings.

### Film Strips

The Central Film Strip Library was extended during 1960 and at the end of the year 82 film strips (including nine sound film strips) were held in the Department.

### Exhibitions

Once again a major exhibition was staged at the Essex Agricultural Show at Great Leighs. The general theme of this exhibition covered :—

- (1) Mental Health
- (2) The Domestic Help Service
- (3) The County Ambulance Service
- (4) Diphtheria and whooping cough immunisation

Throughout the period of the Show, films covering a variety of health education topics were presented in a marquee. These were well patronised by the visiting public.

As was the case last year, the Mass Radiography Unit from Broomfield Hospital, Chelmsford, offered facilities during the two days of the Show for chest x-ray examination to all persons above the age of 14 years.

In addition to this exhibition at Great Leighs, others staged during the year included six "Dental Health Weeks" and three "Foot Health Weeks" in schools.

### **In-Service Training**

With the co-operation of the Central Council for Health Education, two in-service training courses on health education for medical, nursing and other staff were held during the year at Chelmsford and Ilford.

### **Cancer Education**

The pilot campaign referred to in last year's Report was continued in the Mid-Essex Health Area during 1960 and arrangements were made for it to be extended to other parts of the County.

### **Dental Health Education**

The five year pilot dental health education campaign in Harlow New Town continued and is referred to in the Report of the Chief Dental Officer.

### **Royal Society for Prevention of Accidents**

The County Council again made a financial grant to this Society and in return the Society distributed to all the Health Areas information and bulletins on accident prevention. Specimen campaign guides were also made available.

### **Home Safety**

At the end of the year, 11 Home Safety Committees had been established in the Administrative County and each received an annual grant of £20 from the County Council.

### **Supply of Health Education Literature**

The arrangements were continued whereby copies of the publication "Better Health" were purchased and distributed each month to schools, libraries, newspapers and Health Services Clinics throughout the County. Each copy of "Better Health" included an inset containing items of particular local interest.

Other health education literature obtained from a wide variety of sources and covering a wide range of subjects was distributed during the year.

### **Health Education in Training Centres**

Selected films and film strips for the mentally disordered continued to be shown at these centres.

### **Health Education in Schools**

There was an appreciable increase during 1960 in the number of requests from Head Teachers for the presentation of a variety of health exhibits in schools and for general guidance on health education subjects. Whilst the major campaign of dental health education which is being undertaken in Harlow New Town made heavy demands on the time and energy of the Central Office health education unit, the opportunity was taken to meet the increasing demand in the schools and experience gained showed that there is real scope for further extensions of the service, particularly in the junior and infant schools, where the pupils are receptive to modern methods of health education.



In this particular connection, an experiment was commenced in the Autumn of 1959 and continued during 1960 in the North-East Essex Health Area with a view to teaching positive health in a large modern infant school. As part of this experiment, weekly talks were given by health visitors on various aspects of personal hygiene. The subjects covered by these talks were illustrated in model form in a miniature shop and, at the end of the talk, the "model" was added to the stock in the shop. Each talk referred to three imaginary children, "Esther", "Edwin" and "Baby Ian", and a series of 2-inch square coloured slides were made, supported by appropriate script recorded by three children from the school. The script has now been made into a gramophone record which is used with the slides in much the same way as a sound film strip. The climax of this health teaching experiment was a "School Health Week", the centre of which was a large exhibition divided into three sections. Section I was a large imitation shop, fitted with serving counter and shelves, containing all the articles necessary for personal hygiene; Section II consisted of a large treasure chest with drawings depicting good hygiene habits which lead to positive health; Section III was devoted solely to work undertaken by the children in class and included drawings, paintings, essays and puppets. Two evening meetings were held during the week, one for the teachers and the other for parents. The attendances at each of these meetings was good.

### DOMESTIC HELP SERVICE

The demands made upon this service have increased annually since it was established throughout the whole of the Administrative County in 1948 and there is every indication that they will continue to do so for a number of years to come. The main reasons for this expansion are the increasing population (some 300,000 more in Essex now than in 1948), the fact that this population contains an ever-increasing number of old people, and the need, wherever possible, for old people to be looked after at home rather than be admitted to hospital. The following gives particulars of the number of whole-time, part-time and casual helps employed in the service over the past five years :—

Category	1955	1956	1957	1958	1959	1960
Whole-time helps	45	36	29	25	21	17
Regular part-time helps .....	1,005	1,023	1,080	1,327	1,406	1,575
Other helps (casual) .....	1,087	1,224	1,225	1,154	1,145	1,242
Total .....	2,137	2,283	2,334	2,506	2,572	2,834
Total working on 31st December	1,798	1,926	2,013	2,172	2,293	2,466

The policy of employing helps on a part-time rather than a full-time basis was continued but difficulties were experienced at some periods of the year in recruiting and retaining an adequate number of helps to meet fluctuating demands. Maternity cases and all those where children require care are generally in need of full-time help and nowadays it is more difficult to engage women who are readily available for such hours of work.

The number of new cases helped rose from 7,788 in 1959 to 7,974 in 1960. The total number of cases helped was 15,688, an increase of 1,319 over the figure for 1959.

The following tables show how the service has developed over the past five years :—

#### New Cases

Category	1956	1957	1958	1959	1960
Maternity .....	2,146	2,000	2,101	2,121	2,314
Acute sick .....	803	815	810	828	852
Tuberculosis .....	113	121	113	98	79
Chronic sick-aged	2,731	2,650	3,043	3,571	3,612
Chronic sick-others	734	644	696	753	750
Aged non-sick .....	277	210	176	187	150
Others .....	115	139	155	230	217
Total new cases .....	6,919	6,579	7,094	7,788	7,974

#### Total Number of Cases and Hours of Help Provided

Category	1956		1957		1958		1959		1960	
	No. of cases	No. hours provided	No. of cases	No. hours provided	No. of cases	No. hours provided	No. of cases	No. hours provided	No. of cases	No. hours provided
Maternity .....	2,219	141,478	2,079	125,485	2,189	122,641	2,192	112,264	2,406	114,497
Acute sick .....	923	50,822	916	49,320	969	46,979	945	44,917	983	47,720
Tuberculosis .....	300	73,036	294	59,753	260	54,561	235	47,203	206	43,263
Chronic sick—										
Aged .....	6,564	1,126,383	6,687	1,210,276	7,543	1,313,158	8,570	1,500,102	9,575	1,635,013
Chronic sick—										
Others .....	1,432	267,834	1,360	254,724	1,419	272,369	1,608	297,022	1,705	313,262
Aged non-sick	694	104,333	613	98,234	535	82,154	526	80,582	511	77,208
Others .....	159	20,830	177	25,516	209	38,653	293	42,643	302	46,493
All cases .....	12,291	1,784,716	12,126	1,823,308	13,124	1,930,515	14,369	2,124,733	15,688	2,277,456



The statistics show that there was a further fall during the year in the number of hours of help provided for tuberculosis and aged non-sick cases. More help than in any previous year was, however, provided for the aged chronic sick. An increasing number of requests were received (all of which were met) to provide help for families where the mother was receiving treatment for mental disorder. The assistance provided proved to be an invaluable support for many families during a most difficult and often distressing period.

The 22 Area Domestic Help Organisers continued to undertake regular home visiting in order both to ensure that the correct amount of help was being given and also to give advice on social problems which are often a source of worry, especially to old people. The number of visits paid by the Area Organisers (who themselves received guidance from the County Domestic Help Organiser) was :—

				1959	1960
First visits	.....	.....	.....	9,519	10,196
Subsequent visits	.....	.....	.....	21,182	24,434
Other visits	.....	.....	.....	6,634	7,271
				<hr/> 37,335 <hr/>	<hr/> 41,901 <hr/>

A course of training for domestic helps similar to those arranged in previous years was again held in Chelmsford.

### NIGHT ATTENDANCE SERVICE

As indicated in last year's Report, the night attendance service, which had been introduced in one Health Area on an experimental basis, was extended to the whole County from 1st December, 1959. There was ample evidence, during the first full year of its operation, that the service was meeting a very real need and there is every likelihood that demand will increase appreciably as the available facilities become more widely known.

Some difficulties were experienced in recruiting staff, particularly in the seaside resorts and in some rural areas and this made it difficult to afford in all cases the amount of help considered necessary. Efforts were made wherever possible to employ persons with some nursing experience and the appointment of all assistants was on a casual basis.

The type of cases provided for were :—

- (a) patients residing alone who were seriously ill ;
- (b) patients seriously ill in their own homes where an aged husband or wife could not provide the necessary assistance ; and
- (c) the relief of relatives who had to give routine night attention to sick people.

The following gives particulars of the type and number of cases helped and some indication of the period of time during which the assistance was made available :—

	<i>Patients residing alone who are seriously ill</i>	<i>Patients seriously ill in their own homes where an aged husband or wife cannot provide the necessary assistance</i>	<i>The relief of relatives who have to give routine night attention to sick people</i>	<i>Total</i>
Requests for help .....	56	55	187	298
New cases helped .....	53	41	115	209
Total cases completed (a)	55	41	106	202
Cases being helped at 31.12.60—				
Under 3 months .....	1	1	7	9
3-5 months .....	—	1	1	2
6 months and over	1	—	1	2
Total (b).....	2	2	9	13
Total cases helped, i.e. (a) plus (b) .....	57	43	115	215
Hours of help .....	6,121	2,670	12,057	20,848

### FACTORIES ACTS, 1937 AND 1948

During 1960, it was not found necessary to take any action under Section 126 of the Factories Act, 1948, whereby the County Medical Officer of Health is liable, in certain circumstances, to perform, or to arrange for the performance of, the functions of factory doctors.

### NATIONAL ASSISTANCE ACT, 1948

The Principal Senior Medical Officer made 46 visits during 1960 to 29 hostels maintained by the Welfare Committee. During these visits, the opportunity was taken to review the arrangements for the provision of chiropody for the residents, to give advice on the prevention of the spread of infection, on diets, on the correct use of isolation rooms, and on the sterilisation of equipment.

### WELFARE OF THE BLIND AND PARTIALLY-SIGHTED

I am indebted to the County Welfare Officer for the following information relating to the registration of persons found to be blind or partially-sighted.



The total number of blind persons on the register at the end of 1960 was 3,285—1,276 males and 2,009 females. The age group of these patients was as follows :—

	Under 16	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70 & over	Total
Male .....	47	20	35	80	105	159	108	138	584	1,276
Female .....	36	27	31	51	71	169	154	190	1,280	2,009
Total .....	83	47	66	131	176	328	262	328	1,864	3,285

At the end of the year, 881 persons were registered as partially-sighted—343 males and 538 females. The age grouping was as follows :—

	Under 16 years	16-20 years	21-49 years	50-64 years	65 years and over	Total
Male .....	53	24	90	54	122	343
Female .....	39	15	60	73	351	538
Total .....	92	39	150	127	473	881

In all, 537 Forms B.D.8 were completed during 1960 in respect of new cases, including 26 defective-sighted and 21 cases not eligible for registration. As a result of these examinations, 348 persons were newly registered as blind and 142 as partially-sighted.

In addition, 451 examinations were undertaken by ophthalmic specialists. The results of these re-examinations were as follows :—

Blindness .....	124
Partial-sightedness .....	266
Defective-sightedness .....	46
Not eligible for registration .....	15
Total .....	451

The following table gives a summary of the information obtained in following up all new cases where treatment was recommended on Forms B.D.8.

	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
New cases only—				
(i) Number of cases registered during the year in respect of whom Form B.D.8 recommended :—				
(a) No Treatment .....	43	21	—	213
(b) Treatment (Medical, surgical or optical) .....	76	49	—	114
(ii) Number of cases at (i) (b) above which on follow-up :—				
(a) Had received treatment .....	58	42	—	93
(b) Had refused treatment .....	8	3	—	4

### PREVENTION OF BREAK-UP OF FAMILIES

Arrangements were continued whereby health visitors, ably supported by domestic helps, took an active part in the prevention of break-up of families. The domestic helps working in the homes of these families were carefully chosen, regard being paid both to their ability and also to the times when they could assist. The extent of the work undertaken in this field is increased by the arrangement whereby, in particularly difficult cases, the assessed charge for the provision of domestic help can be reduced or waived, if it is considered that the family can thereby be kept together.

Where it was considered that only routine methods of training and discipline would prove successful, arrangements were made for the family concerned to be sent to rehabilitation centres. The success of this type of training, which can be costly, often depends on the re-housing of the family on their return. In this connection, the co-operation of Housing Authorities was very much appreciated.

In less difficult cases, short periods of convalescence were provided both for the mothers and their children.

### CHIROPODY

As mentioned in the Report for 1959, the County Council agreed in principle to the provision of a comprehensive chiropody service throughout the Administrative County, initially for the physically handicapped, the elderly and expectant mothers. Previously, comprehensive chiropody facilities were only available in the Barking, Dagenham, Leyton and Walthamstow Health Areas and in certain parts of the South Essex, South-East Essex and Forest Health Areas. In addition, the Essex Old People's Welfare Committee, to which voluntary organisation the County Council made grants for the purpose, provided chiropody facilities for the elderly through affiliated organisations.



In order to implement the extension to the chiropody service, the establishment of full-time chiropodists was increased to 51.9. At the end of 1960, the equivalent of 31.1 full-time chiropodists were in post.

Arrangements were made during the year for chiropodists on the Council's staff to take over the provision of chiropody treatment for residents in the Homes for Old People maintained by the County Welfare Committee.

An indication of the work undertaken during the year is given below :—

	<i>New cases treated</i>	<i>Cases under treatment</i>	<i>Clinic attendances</i>	<i>Domiciliary treatments</i>	<i>Treatments at Welfare Committee's Establishments</i>
Children .....	1,700	1,056	8,575	—	—
Physically handicapped .....	415	743	3,317	377	135
Aged (over 65 years) .....	4,446	9,854	37,729	1,742	1,522
Others .....	2,192	8,180	37,205	15	1
Total .....	8,753	19,833	86,826	2,134	1,658

The development of the service provided during 1960 as compared with the previous year is shown below :—

	<i>New Cases Treated</i>	<i>Clinic Attendances</i>
1959 .....	5,054	76,449
1960 .....	8,753	86,826

During the year, the provision of domiciliary treatment was extended to those patients who required chiropody but who were unable to travel by public transport or ambulance to one of the Council's clinics.

## REGISTRATION AND INSPECTION OF NURSING HOMES

At the end of 1960, there were 23 nursing homes registered by the County Council under Part VI of the Public Health Act, 1936. During the year, two nursing homes providing six beds were closed. No new nursing homes were registered during the year.

One licence, this in respect of a nursing home providing eleven beds, was withdrawn during the year.

## AGENCIES FOR THE SUPPLY OF NURSES

During 1960, one agency for the supply of nurses ceased to operate because of the ill-health of the proprietress but the other registered agency continued to function.

In common with the general trend, the number of nurses available for placing through agencies is gradually diminishing.

## SECTION VI—THE AMBULANCE SERVICE

### Staff

At the end of 1960, the operational staff consisted of 23 station officers, 33 assistant station officers, 4 head drivers, 466 driver attendants, 2 controllers, 8 control room assistants, 28 control clerk telephonists, and 10 clerk telephonists.

All driver attendants were again entered for the National Safe Driving Competition organised by the Royal Society for the Prevention of Accidents and 376 succeeded in obtaining an award signifying freedom from any accident, however slight, to person or property for which they were in any way to blame ; this was 2 less than in 1959.

The staff were encouraged to obtain a first aid certificate and to take a refresher course at intervals not exceeding two years. At the end of 1960, the great majority of driver attendants held current first aid qualifications recognised by the County Council.

The First Aid and Efficiency Competition for the County Ambulance Service was held at the Chelmsford Ambulance Station and was won by Driver Attendants I. D. Hoy and A. R. Wiggins of the Colchester Ambulance Station. The winning team later took part in the Regional Competition and finished tenth. During the year films on first aid were shown at certain ambulance stations throughout the County and were well supported by ambulance staff and members of other organisations.

Certificates suitably inscribed on parchment and framed were awarded to Driver Attendants S. J. R. Grove, for bravery and devotion to duty and to J. K. Houghton for devotion to duty, in recognition of the work they carried out at great personal risk in removing an employee of British Railways from contact with high voltage electric cables and then conveying him to hospital. Both Driver Attendants are employed at the Clacton-on-Sea Ambulance Station.

### Vehicles and Stations

The new ambulance station in Pole Barn Lane, Frinton-on-Sea was brought into operation on 1st September, 1960 and the arrangements with the Agency Services were thereupon terminated. The full-time staff of the Agency accepted employment with the County Council and continued to man the one ambulance at the Station.

In July, 1960 the operational vehicle establishment was increased by one ambulance ; the total fleet numbered 125 ambulances and 82 sitting-case vehicles. During the year, 51 new diesel-engined ambulance vehicles were



brought into use to replace a similar number of obsolete petrol-driven vehicles. Thirty-four of these vehicles are capable of carrying either two stretcher patients or one stretcher and five sitting patients. The remaining 17 carry either two stretcher patients, or one stretcher and five sitting patients, or 10 sitting patients.

By the end of 1960, there were 125 diesel-engined ambulance vehicles in use in the Service and orders were placed during the year for 19 more, similar to those already purchased.

Additional ambulance vehicles were allocated to the Thundersley and Vange Ambulance Stations and the Frinton-on-Sea Agency Service vehicle was taken into the County fleet when the Station became part of the directly-provided Service. Apart from Frinton-on-Sea, the agency services remained unchanged. About 18 per cent of the total number of vehicles in the Service continued to be held in reserve for use in any part of the County.

The Chief Transport Officer continued to be responsible for the general repair and maintenance of the vehicles. Each vehicle was taken into the Council's workshops for servicing every 2,000 miles and was given a major overhaul after having travelled 10,000 miles.

During the year certain experiments were carried out on the stretcher equipment carried on the vehicles and safety straps were fitted to stretchers.

### Communications

No major alterations were made in the system of radio telephony used in the Ambulance Service but a start was made on the installation of 59 additional transmitter/receivers with a view to equipping all operational vehicles with radio.

### Operation of the Service

*General:* The arrangement, to which reference was made in previous Reports, whereby general medical practitioners, when arranging a patient's admission or first appointment at a hospital, inform the hospital that ambulance transport is necessary and the hospital then order the ambulance, has continued to prove successful.

The scheme introduced in September, 1959 whereby two ten-seater vehicles were outposted at Whipps Cross Hospital, Leytonstone, to undertake local journeys under the direction of the Hospital Transport Officer continued to operate satisfactorily. In addition, a County Officer was outposted permanently at The London Hospital to arrange and organise the conveyance of Essex patients in the London area.

*Major Accidents:* There were two major accidents during the year. The first occurred at Redbridge Underground Railway Station, Ilford, on 11th

August, 1960 when 36 casualties (20 of whom were detained in hospital) were dealt with by the Service. The second incident occurred at Wickford on 1st November, 1960 when a train was derailed just outside Wickford Railway Station. On this occasion seven adults and two children were conveyed to hospital.

Letters of appreciation were received from the London Transport Commission complimenting the Service on the prompt and efficient manner in which casualties were dealt with and conveyed to hospital.

*Operational Statistics:* The numbers of patients conveyed, total mileage involved and average mileage per patient in 1959 and 1960 for the whole Service were as follows :—

		<i>Directly Provided Service</i>	<i>Agency Service</i>	<i>Hospital Car Service</i>	<i>Whole Service</i>
Patients conveyed	1959	632,164	7,902	47,333	687,399
	1960	659,763	6,688	48,451	714,902
Mileage	1959	3,558,163	108,231	773,207	4,439,601
	1960	3,685,812	78,776	817,190	4,581,778
Average mileage per patient	1959	5.63	13.7	16.3	6.46
	1960	5.59	11.8	16.9	6.41

More patients were conveyed with a correspondingly larger mileage as compared with the previous year. There was, nevertheless, a slight decrease in average miles per patient for both the directly-provided Service and for the Service as a whole. As will be seen from the following table, the overall decrease in mileage per patient did not quite reach the low level attained in 1958.

<i>Year</i>	<i>Patients conveyed</i>	<i>Mileage</i>	<i>Average mileage per patient</i>
1952	466,750	3,803,322	8.15
1953	491,472	3,860,558	7.85
1954	594,166	4,308,453	7.25
1955	628,612	4,341,334	6.91
1956	632,775	4,337,453	6.85
1957	643,542	4,319,136	6.72
1958	693,164	4,376,790	6.31
1959	687,399	4,439,601	6.46
1960	714,902	4,581,779	6.41

*Emergency Cases:* During 1960, 53,315 emergency cases were conveyed by the Service compared with 53,868 in 1959. Emergency cases carried represented 7.5 per cent of the total cases conveyed compared with 7.8 per cent in the previous year.



*Non-Emergency Cases:* The number of non-emergency patients conveyed in 1960 was 661,587 compared with 633,511 in 1959. The majority of these (90 per cent) were taken to clinics or hospital out-patients' departments.

### Cost of the Service

The following table, which relates to financial years, shows the total cost of the service, the cost per patient and per mile for the whole service for the last five years.

Year ended	Gross Expenditure	Cost per patient		Cost per mile	
		s.	d.	s.	d.
31.3.1956	£582,762	18	4	2	7
31.3.1957	£642,811	20	3	2	11
31.3.1958	£653,406	20	3	3	0
31.3.1959	£673,047	19	3	3	0
31.3.1960	£658,905	18	9	2	10

## SECTION VII—THE MENTAL HEALTH SERVICE

### Administration

The Service continued to be administered during the year on the same lines as previously. The Mental Health Sub-Committee met on the fourth Friday in each month except during August.

### Staff

Following the resignation of Dr. R. C. Greenberg, Dr. M. E. York-Moore, previously Senior Hospital Medical Officer, Horton Hospital, Epsom, was appointed Senior Medical Officer (Mental Health) and took up his duties on 25th April, 1960. Mr. I. T. Hazell was appointed as a duly authorised officer at the North-East Essex Sub-Office and commenced duty on 11th April, 1960. He took the place of Miss R. E. Lewis who resigned her appointment from 29th February. Mr. C. St. C. Chenery, who held a similar post in this Sub-Office, retired from the service of the County Council with effect from 26th August, 1960. It was not, however, necessary to appoint a successor as an additional officer had been employed for some time owing to the fact that Mr. Chenery had had an accident which prevented him from carrying out his full duties.

Following the receipt of Ministry of Health Circular 14/60, dated 11th July, 1960, which dealt with certain provisions of the Mental Health Act, 1959, arrangements were made for the Supervising and other Duly Authorised Officers to be redesignated and re-appointed as Mental Welfare Officers from

1st November, 1960, for the purpose of exercising functions under Sections 22, 135 and 140 and Parts IV and V of the Mental Health Act, 1959.

Arrangements were made for mental welfare officers to attend week-end courses on "The Community and Mental Health" organised by the County Borough of East Ham at the Debden House Residential Centre for Further Education, Loughton, on 27th and 28th February and 23rd and 24th April, 1960. In addition, continuing the policy adopted in previous years, one mental welfare officer attended a refresher course of one week's duration organised by the National Association for Mental Health. The existing training scheme for the staff of Training Centres (whereby two members of the staff attend courses held by the National Association which lead to the award of the Diploma for Teachers of the Mentally Handicapped) was extended so as to allow up to four members of the staff to attend. In the past these courses were primarily for the staff of Junior Centres but a new course for men and women concerned with the training of mentally subnormal adults, which also leads to the award of the Association's Diploma, was introduced in 1960. Arrangements were therefore made for the attendance of an Assistant Instructor from one of the Senior Training Centres. Eighteen members of the staff of Training Centres also attended the Association's one-day refresher course for teachers of the mentally handicapped.

### **Mental Health Act, 1959**

Reference has been made in the Reports for 1958 and 1959 to the new Mental Health Act and the development scheme which was formulated by the Council in accordance with advice received from the Ministry of Health. This scheme, full details of which were set out in the 1959 Report, was approved by the Minister, with only minor amendments on 25th July, 1960.

In July, 1960, the Minister of Health brought some of the Sections of the Act into operation and the remaining provisions became operative on 1st November, 1960. This date will no doubt become as well known in the field of mental health as 5th July, 1948 is in regard to health and welfare services generally.

The implementation of the new legislation has been accomplished smoothly and no undue difficulties have been experienced.

### **Voluntary Associations**

As in previous years, excellent co-operation continued between the County Council and national and local voluntary associations but none of the powers and duties of the Council were delegated to such organisations. The annual grant made to the National Association for Mental Health in support of their general work was increased in response to a request from the Association.

Following a request from the Barking Health Area Sub-Committee in connection with a proposal by the Barking Borough Council to sponsor a voluntary association to set up social and allied facilities for persons discharged from psychiatric hospitals, it was agreed that no objection be raised on behalf



of the County Council to mental welfare officers assisting in this work in their own time. This Association subsequently became known as the Barking Association for Mental Health and a financial grant was made by the Council to assist in its initial establishment. A conference was held between members of the Association and representatives of the County Council in November, as a result of which arrangements were made for a mental welfare officer to attend at the Barking Town Hall on one afternoon each week in order to deal with problems raised by members of the public. This arrangement was for an experimental period of six months and is to be reviewed at the end of that time.

In October, consideration was given to an offer made by the Women's Voluntary Service for Civil Defence to provide regular assistance at various Training Centres. It was agreed that such voluntary assistance should be made available as an experiment at one Training Centre for the duration of the Spring term, 1961. The position will be reviewed at the end of that time with a view, if appropriate, to the scheme being extended to other Centres.

### Work Undertaken in the Community

The number of visits made by the mental welfare officers was as follows :—

From 1st January to 31st October, 1960 :

Mental Deficiency Acts, 1913 to 1938 :	Number of Visits
New cases .....	616 (715)
Statutory supervision .....	7,609 (9,716)
Voluntary supervision .....	3,597 (3,991)
Case notes .....	97 (107)
Licence cases .....	151 (200)
Home circumstances reports for visitors .....	165 (345)
Guardianship cases .....	70 (105)
Holiday, licence and discharge applications	63 (127)

Lunacy Act, 1890 :

Preliminary investigations .....	2,718 (3,478)
Section 14 and 16 (Certified) .....	529 (889)
Section 11 (Urgency Orders) .....	374 (291)
Section 20 (Detention for not more than three days) .....	594 (654)
Section 21 (14 day orders) .....	5 (1)

Mental Treatment Act, 1930 :

Section 1 (Voluntary) .....	901 (768)
Section 5 (Temporary) .....	12 (82)

From 1st November to 31st December, 1960 :

National Health Service Act, 1946—Community Care :

Initial Visits .....	703 (—)
Subsequent Visits .....	1,666 (—)

From 1st January to 31st December, 1960 :

Visits in connection with patients' property .....	72 (42)
Other visits .....	5,039 (4,287)
Total	24,981 (25,268)

Comparative figures for 1959 are shown in parenthesis.

### Hospital Admissions and Accommodation

One hundred sub-normal patients were admitted to hospital during the year but, of these, only seven were detained compulsorily. The waiting list for hospital admission for this type of patient again showed an increase, although only a small one, and at 31st December contained 360 names, 4 more than at the end of 1959.

The other admissions which were arranged during the year are given below. I should like to express appreciation of the assistance given by the County and Metropolitan Police in dealing with difficult cases :—

#### Lunacy and Mental Treatment Acts, 1890 to 1930

					<i>With the assistance of the duly authorised officers</i>	
Lunacy Act, 1890—						
Section 1 (Urgency Orders)	.....	.....	.....	.....	97	(143)
Sections 14 and 16 (Certified)	.....	.....	.....	.....	197	(499)
Section 20 (Detention for not more than three days)	.....	.....	.....	.....	368	(284)
Mental Treatment Act, 1930—						
Section 1 (Voluntary)	.....	.....	.....	.....	19	(353)
Section 5 (Temporary)	.....	.....	.....	.....	1	(48)

#### Mental Health Act, 1959

					<i>By or with assistance of mental welfare officers</i>	
Section 25	.....	.....	.....	.....	43	(—)
Section 26	.....	.....	.....	.....	12	(—)
Section 29	.....	.....	.....	.....	71	(—)

Note: Figures in parenthesis relate to 1959

Consultations were held during the year with representatives of the Regional Hospital Board concerning proposals to revise the catchment areas for psychiatric hospitals in the North-East Metropolitan Region. The proposals were submitted by the Board to the Minister of Health who indicated that, whilst he was prepared to accept them, the new arrangements should not be brought into operation until the new in-patient psychiatric unit to be provided at the Herts & Essex Hospital, Bishop's Stortford, is functioning.



## **Mental Deficiency Acts, 1913-38**

Particulars of the number of cases brought to the notice of the local health authority during the period 1st January to 31st October, 1960 (i.e. the date on which these Acts were repealed) together with their disposal, are given in Table V at the end of this Report. It is not possible to compare the figures shown in this Table with those given in previous years because of changes in the law.

No general review of patients under guardianship was undertaken during the year but three Orders were discharged when the patients attained the age of 16 years and the National Assistance Board had undertaken to make a financial grant sufficient for their needs. Four patients were placed under guardianship and the Council assumed responsibility for the cost of their maintenance. At the end of 1960, 19 patients remained under guardianship. These are all being reviewed under the provisions of the Mental Health Act, 1959.

## **Training Centres**

Steady progress was maintained in improving facilities at existing Training Centres and in providing additional places either in hired premises or in purpose-built Centres.

Perhaps the most important single event in this connection was the opening of the Comprehensive Training Centre at Colchester by the Parliamentary Secretary to the Ministry of Health, Miss Edith Pitt, O.B.E., M.P., on 30th June, 1960. The Centre was built on a site in Halstead Road, Lexden, belonging to the County Council. A generous offer by the Colchester and District Society for Mentally Handicapped Children of a gift of money to the value of the land on which the Centre was built was gratefully accepted by the County Council.

The Centre provides a total of 75 places (50 in the Junior Section and 25 in the Senior Section). It replaces the old Junior Training Centre which was held in hired premises and, in addition, provides facilities for male adults. The registers of the Junior and Senior Centres contained the names of 39 and 20 pupils respectively at the end of the year. The Junior Section was brought into operation on 9th May and the Senior Section on 16th May, 1960.

Reference was made in the Report for 1959 to the approval which had been given to the leasing and adapting of accommodation for use as a Comprehensive Training Centre at Saffron Walden. These negotiations were completed in the early part of the year and the Training Centre was brought into operation on 20th June, 1960. At the end of the year, there were 17 names on the Register.

At 31st December, 1960, the registers of the 14 Centres contained the names of 952 pupils, an increase of 158 over the corresponding figure for 1959.

Approval was obtained from the Ministry of Health in October, 1960 to the erection of an additional Comprehensive Training Centre at Romford which, when it is completed, will enable the Ilford Junior Training Centre, which is held in hired premises, to be closed and will also relieve the pressure on the Ilford Senior Training Centre.

The Minister of Health also undertook to recommend loan sanction during 1960-61 for the erection of comprehensive training centres in the New Towns of Harlow and Basildon. It is proposed to build the Centre at Harlow in two stages. The first stage will comprise a Centre designed to provide facilities and training for junior pupils, including a special care unit for children unsuitable for attendance at a Junior Centre, and to include accommodation which will ultimately be shared by the Senior Centre. The second stage will provide training facilities, when justified, for adult pupils.

Until such time as a suitable site can be found for a Senior Training Centre in Chelmsford, arrangements were made for male adults residing in Chelmsford to attend the Colchester Senior Centre.

The Wanstead Junior Training Centre is accommodated in premises which were adapted for the purpose when no longer required for use as a Day Nursery. Having regard to the numbers already on the register, approval in principle was given to the provision of an additional classroom and the enlargement of existing accommodation used as an assembly and dining room.

In May, 1960, approval was given by the Minister of Health to the erection of an Advanced Training Unit for 25 high-grade adult female mentally disordered persons at Dagenham. It is proposed to provide training in the workroom of this Unit with the object of enabling as many as possible to obtain employment in local light industries or sheltered employment. Consultations took place with the Ministry of Labour and with local firms regarding the operation of the Unit. It is also intended to provide domestic training in the kitchen, laundry and demonstration room and it is possible that trainees may be given other instruction (such as handwork) in the recreation room.

Other items in connection with Training Centres included the improvement of heating and hot water services at the Dagenham and Ilford Junior Centres and the provision of a portable stage at the Thurrock Junior Centre. Travelling facilities for pupils attending the Centres were improved and extended wherever possible.

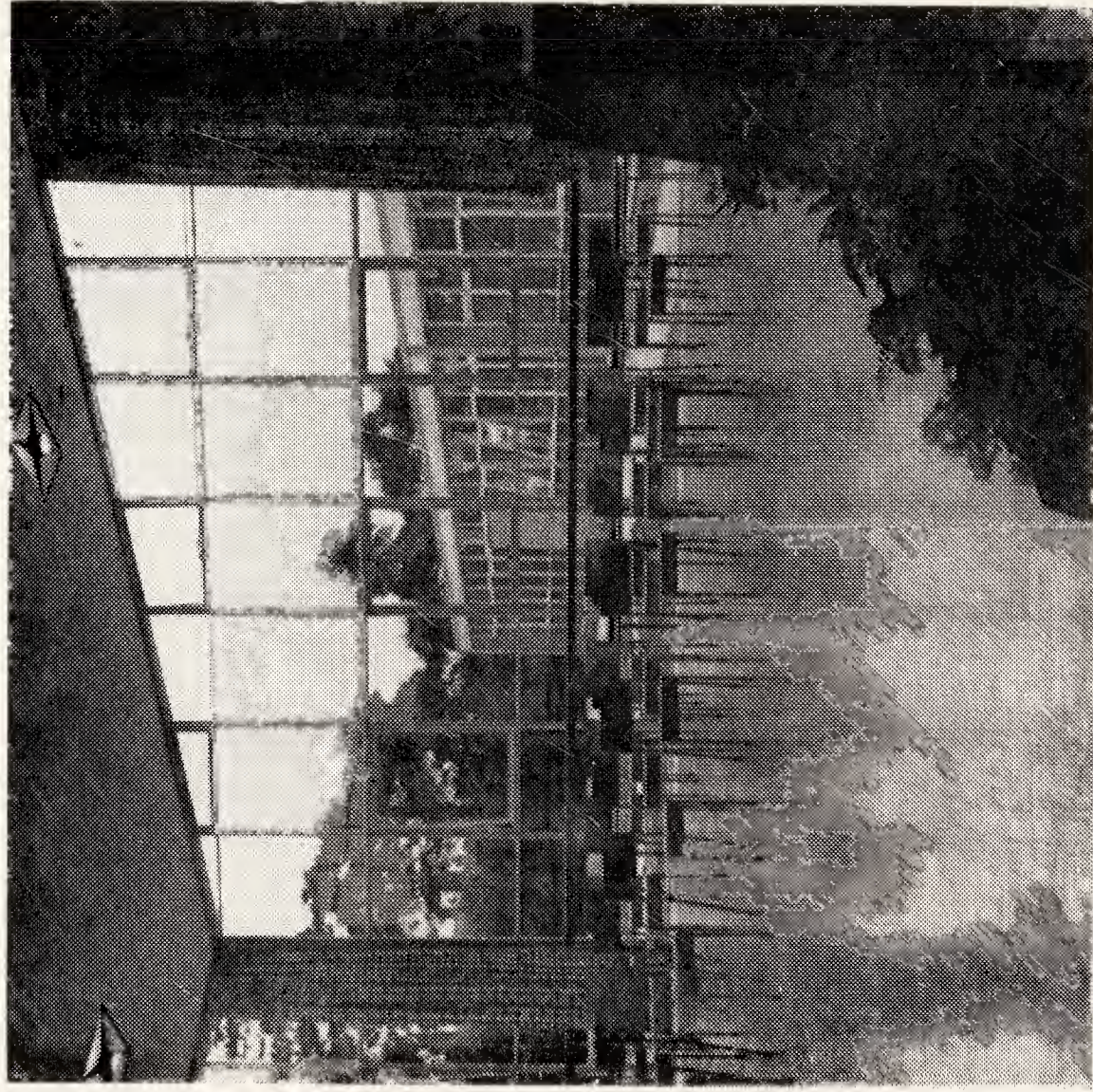
Consideration was given to a proposal to provide television receivers at Training Centres and regard was had to a report furnished by the Chief Education Officer concerning the use of television in special schools. In the light of all the circumstances, it was, however, decided that no action should be taken in this matter at the present time.







COLCHESTER COMPREHENSIVE TRAINING CENTRE



*Inside the assembly hall*



*The interior of the nursery*

By courtesy of THE MUNICIPAL JOURNAL



A survey of the occupation and training facilities of a number of the major authorities in the country, including Essex, was undertaken by Inspectors of the Board of Control prior to the Board's dissolution.

Upon consideration of the report at the conclusion of the survey, it was decided to create a post of Organiser of Training Centres. It was also decided to increase the number of full-time training staff employed at the Centres so that the future ratio of staff to pupils would be 1 to 12. This meant the creation of nine additional posts of Assistant Supervisor and two additional posts of Assistant Instructor. Approval in principle was also given to the setting up of a trainee scheme to ensure a supply of trained staff for the future, and to the appointment of Attendants for nursery groups in order to relieve teaching staff from the necessity to assist pupils with their physical needs.

### **Residential Accommodation**

In accordance with the plan for the development of the Mental Health Service, further consideration was given to the provision of residential accommodation for mentally disordered persons. A scheme was prepared for the erection, at an estimated cost of £23,150, of a residential hostel for 24 mentally disordered children at Colchester, and this was subsequently approved by the Minister of Health.

Discussions took place with the medical staff of the psychiatric hospitals and officers of the Regional Hospital Boards regarding the production of a standard plan for a residential hostel for adults no longer in need of hospital treatment.

Information was received early in the year that the National Association for Mental Health, in conjunction with the Buttle Trust, had under consideration a proposal to open a Hostel to cater for pupils leaving special schools for the maladjusted. It was agreed that, subject to consideration of individual cases recommended for admission, approval in principle be given to the use by the Council of the facilities which would become available in the event of such a hostel being provided.

Patients provided with varying periods of temporary residential care at the expense of the County Council numbered 186 and arrangements were made for the temporary admission of 13 others to appropriate hospitals. Some patients were also admitted to hospital for temporary periods following arrangements made direct with the hospitals by the general medical practitioners or by the families concerned.

### **Care and After Care**

During 1960, social after care for persons living in the County continued to be provided by the mental welfare officers as it was still not possible to recruit a psychiatric social worker.

In view of the increased attendances at the Ilford Goodwill Social Club, which is provided to assist in the rehabilitation of mentally disordered patients, authority was given for an increase in the grant made to support the work of the Club.

As is noted elsewhere in this Report, assistance was given in connection with the establishment of the Barking Association for Mental Health which now provides social and allied facilities for persons living in Barking who have been discharged from hospital.

### **Mental Health Week**

Following the designation of the year 1960 by the World Federation of Mental Health as World Mental Health Year, the Minister of Health drew attention to the fact that Mental Health Week in this country would take place from 9th to 16th July, 1960. The purpose of Mental Health Week was to bring to the notice of the public details of the existing services and plans for the future, both in the preventive field and in caring for the mentally disordered.

Arrangements were accordingly made for the Colchester Comprehensive and the Barking, Chelmsford and Thurrock Junior Training Centres to be open to the public during the evenings of different days in that week and for displays and film shows to be given at those Centres. In all, over 500 visitors attended the four Centres concerned

## **SECTION VIII—REPORT OF THE CHIEF DENTAL OFFICER FOR 1960**

Facilities for the comprehensive dental treatment of expectant and nursing mothers and young children is an obligation on the Local Health Authority by Section 22 of the National Health Service Act, 1946. This treatment is carried out by dental officers who provide services for the children in attendance at maintained schools in the County. The patients entitled to treatment under the 1946 Act constitute the priority classes but only to a very small degree is priority of treatment a fact indeed. The following table shows the service we are able to offer to mothers and the service for pre-school children is proportionate.

<i>Year</i>	<i>Births</i>	<i>Mothers examined</i>	<i>Percentage examined</i>
1950	23,893	2,370	9.91
1956	26,003	2,020	7.77
1957	27,019	1,832	6.78
1958	28,354	1,557	5.49
1959	28,928	1,478	5.14
1960	30,412	1,359	4.47



However, the treatment which is being carried out shows emphasis on the conservation side and, from this point of view, the returns are quite encouraging. In the case of adults, the ratio of patients to extractions is 0.92 : 1 and for young children 1.71 : 1. The following table shows the work completed per 100 patients.

Year	Expectant and Nursing Mothers				Pre-School Children	
	Scalings	Fillings	Extractions	Dentures	Fillings	Extractions
1950	30	73	174	23	66	110
1956	52	160	173	26	119	96
1957	42	155	170	23	125	106
1958	39	139	143	23	110	94
1959	44	135	132	20	116	82
1960	43	138	150	18	123	72

## Staff

On the 31st December, the number of dental officers in post for all services of the County Council was the equivalent of 31.5 whole-time dental surgeons. As a result of evening sessions, this figure is increased by the equivalent of one whole-time dental officer. North-East Essex, South-East Essex and Dagenham were without a single whole-time dentist. There is a need for 100 dental officers to provide basic treatment for the priority classes and school children throughout the County. Approximately 1/12th of the available time was devoted to the treatment of mothers and young children.

The following table shows the state of the staff during the last few years and the worst feature is the persistent fall of whole-time officers employed. The average age of the ones remaining is high.

Year	Whole-time	Part-time and Sessional	Equivalent Whole-time
1950	18	16	23.0
1956	26	47	44.3
1957	21	57	39.4
1958	20	51	36.2
1959	20	57	36.5
1960	17	46	32.5

Mr. J. C. Timmis was appointed to the newly created post of Assistant Chief Dental Officer and took up his duties on the 1st April, 1960, after being on the staff of the Walthamstow Health Area since 1949. He left the

service of the County Council at the end of October to take up the post of Chief Dental Officer in Staffordshire. I would like to express my appreciation of his work for this Authority as a full-time officer during the past eleven years.

The policy has now been adopted by Members that an Area Dental Officer for each Health Area will be appointed instead of one Assistant Chief Dental Officer on the Central Office staff.

### **Ancillary Dental Workers**

It will be recalled that there is at present one class of ancillary dental worker—dental hygienist, whose scope is very narrow indeed. By virtue of the Dentists Act, 1957, the Privy Council charged the General Dental Council with the responsibility of carrying out an experiment in the training and use of a further class of ancillary dental worker whose duties will include the filling of teeth and the extraction of milk teeth. The teaching school at New Cross, London, was completed and staffed and 60 students started their two-year training in October, 1960. When this is complete a three-year trial in the field will be required and, if this is found successful, the scheme will be made permanent, with an annual intake of about 60 trainees. The ancillaries will be employed in the hospital and local authority services. They will work under the direct supervision of a registered dentist and, in practice, this means that they cannot be employed in local authority clinics with only a single surgery. I made a point of this in my Report last year.

### **Orthodontics**

The orthodontic consultant, Mr. Willcocks, was appointed to the staff of the North East Metropolitan Regional Hospital Board during the year under review. His main premises are at Whipps Cross Hospital but he also pays periodic visits to Southend and Colchester and, as soon as accommodation can be arranged, he will hold sessions in Chelmsford. So in time it appears that, with the continuing assistance from the London teaching schools, a fairly comprehensive consulting service will emerge. The North-West corner of the County around Saffron Walden will, however, continue to look to the East Anglian Regional Hospital Board at Addenbrookes Hospital, Cambridge, for this service.

### **Premises and Equipment**

New Health Services Clinics with dental suites were opened during the year at Kenwood Gardens, Ilford and Thames View, Barking, the former having two dental surgeries. The layout and equipment of these premises are the latest. Several of the surgeries have been furnished with the high-speed compressed-air drill after a trial period in several places in the County. It was found that the patients tolerated this new machine quite well and not a single adverse report from the areas has been received.



## Post-Graduate Courses

### (a) *Children's Dentistry*

Suitable courses are arranged from time to time at the Eastman Dental Hospital and by the dental group of the Society of Medical Officers of Health and dental officers are given leave in turn to attend these. Suitable special lectures, demonstrations and practical work periods are arranged.

### (b) *General Anaesthetics*

Courses at the Eastman Dental Hospital are open to Assistant County Medical Officers who act as anaesthetists for the dental staff and places are reserved as soon as possible when new members of the area medical staffs undertake this work. During the year, 214 administrations of general anaesthetics for mothers were given and 607 for young children. Most of the work of the anaesthetists however is performed on school children, and in fact over 12,000 anaesthetics were administered during 1960, most of them by Assistant County Medical Officers. All the general anaesthetic machines are regularly serviced by the makers' engineers to obviate as far as is possible any fault in the apparatus especially the calibrating device which controls the supply of oxygen to the patient. All the machines are fitted with an emergency oxygen supply.

## Dental Laboratories

Laboratories provided by the Council at Barking and Walthamstow continue with the work of making dentures, orthodontic appliances and other necessary pieces of work for patients under the care of the local health and education authorities and the National Health Service Executive Council. The laboratory at Barking is understaffed but owing to the lack of dental officers at Walthamstow the laboratory there is now taking work from other areas in the County. The main items produced by the laboratories include 748 dentures, new, repaired and relined, 53 crowns and inlays and 542 orthodontic appliances. In addition, many other items such as special impression trays and orthodontic study models have been made. On the top of this a considerable amount of work is let out to private technicians to the profession. There is a scarcity of skilled dental technicians at the present time and it is doubtful when the shortage will be made good.

## Dental Health Education

It will be recalled that Members agreed in addition to the normal Dental Health Education programme throughout the County that a five-year campaign should be held in Harlow with the co-operation of the General Dental Council and the Ministry of Health. The first inspections of 600 children

at Harlow and another 600 for comparison at Basildon were completed early in the year and the campaign is now in full swing. We are getting enthusiastic co-operation from the teaching staffs and the subject is brought into the general curriculum of the schools. Another inspection will be undertaken at the end of three years and finally in five years from the start of the campaign. After that an assessment will be made as to the success or otherwise of the project.

Dental Health Education is also undertaken at clinics by the health visitors and health education staff. Film shows are given and there is generally a growing awareness of the advantages of a good natural set of teeth. It is a great misfortune that we are unable to carry the teaching to the logical conclusion, that of inviting mothers and children for treatment in the authority's clinics. We have not the staff to do this and a great opportunity for good is being missed.

### **Local Anaesthesia**

Members agreed to co-operate in an investigation on a new type of dental hypodermic syringe and a new local anaesthetic. The three armed forces of the Crown, private practitioners and the staff at the Eastman Dental Hospital are also co-operating. At the end of the year more than half the treatments had been completed.

### **Visitors**

Several visitors came to the department and amongst these were a fluoridation study group of the Society of Medical Officers of Health who visited Greyfriars School, Colchester; Dr. Samuels, Chief Dental Officer, Sierra Leone; Dr. Zaran, Chief Dental Officer, Cairo; Mr. Graeme Finlay, M.P., who visited a dental health exhibition in Harlow; Miss J. R. Forrest, L.D.S., and Dr. Rolant-Thomas of the Ministry of Health who came to see cases of fluoridation at Gilberts School, Colchester.

### **Fluoridation of Water Supplies**

The investigations on artificial fluoridation at Angelsey, Watford and Kilmarnock are proceeding according to plan and some results are expected to be published in 1962. A fluoride salt added to domestic water to the total extent of 1 p.p.m. acts as a partial inhibitor of dental decay and no untoward side effects have been observed in spite of the most vigorous searching here, and for the last 15 years in America where about 35,000,000 people are drinking this enriched water.

It may be realised from this report that three main objectives should be in our minds regarding the control of dental decay which still increases



particularly in the permanent dentition. First to increase the number of dentists on the register and give the profession as much ancillary help as possible ; secondly, to carry out a vigorous dental health education programme which tends to lower the incidence of decay ; and thirdly, subject to the results of the experiments, to enrich the water supply up to 1 p.p.m. fluoride content.

There is no doubt that there is a place in the scheme of things for a service such as the one operated by local authorities. One where people are invited to have treatment and not left to find it themselves. The National Health Service is no complete substitute for the local authority service. There is also no doubt that the situation in Essex has deteriorated during the last 12 months. The number of priority patients has increased and the number of dental sessions has decreased. In the 1959 annual report of the Ministry of Health the following statement relating to the M. & C.W. Dental Service occurs : " It follows that for the most part Local Authorities have had to be content to try to meet the actual demand rather than to stimulate it." This is the position in Essex today.

J. BYROM

Health Department

County Hall, Chelmsford

13th April, 1961





TABLE I—BIRTHS, DEATHS, ANNUAL RATES, ETC., 1960

Health Area and County District	Estimated Population		Estimated Migration	Live Births		Still Births		Infant Deaths		Deaths at all ages	
	1959	1960		No.	Rate*	No.	Rate†	No.	Rate‡	No.	Rate*
Colchester B. . . . .	63,980	66,480	+ 2,065	1,114	16.8	17	15	20	18	679	10.2
Harwich B. . . . .	13,760	13,850	+ 43	204	14.7	4	19	3	15	157	11.3
Brightlingsea U. . . . .	4,690	4,700	+ 8	61	13.0	—	—	2	33	59	12.5
Clacton U. . . . .	25,480	26,210	+ 883	296	11.3	3	10	6	20	449	17.1
Frinton and Walton U. . . . .	9,210	9,470	+ 341	86	9.1	2	23	3	35	167	17.6
Halstead U. . . . .	6,660	6,700	+ 8	95	14.2	1	10	2	21	63	9.4
West Mersea U. . . . .	3,120	3,140	+ 16	44	14.0	—	—	—	—	40	12.7
Wivenhoe U. . . . .	2,610	2,660	+ 43	47	17.7	2	41	—	—	40	15.0
Halstead R. . . . .	16,860	16,900	+ 18	251	14.8	5	19	4	16	229	13.5
Lexden and Winstree R. . . . .	22,440	22,480	+ 65	318	14.1	8	25	4	13	343	15.3
Tendring R. . . . .	24,950	25,150	+ 218	335	13.3	9	26	2	6	353	14.0
<b>1. North-East Essex</b>	<b>193,760</b>	<b>197,740</b>	<b>+ 3,708</b>	<b>2,851</b>	<b>14.4</b>	<b>51</b>	<b>17.6</b>	<b>46</b>	<b>16.1</b>	<b>2,579</b>	<b>13.0</b>
Chelmsford B. . . . .	44,080	45,990	+ 1,483	879	19.1	15	17	15	17	452	9.8
Maldon B. . . . .	10,040	10,130	+ 71	172	17.0	5	28	2	12	153	15.1
Safron Walden B. . . . .	7,550	7,630	+ 64	117	15.3	3	25	1	9	101	13.2
Braintree and Bocking U. . . . .	19,580	19,830	+ 130	375	18.9	6	16	12	32	255	12.9
Burnham-on-Crouch U. . . . .	3,930	3,950	+ 18	55	13.9	1	18	—	—	53	13.4
Witham U. . . . .	8,970	9,070	+ 48	162	17.9	1	6	7	43	110	12.1
Braintree R. . . . .	21,550	21,690	+ 11	360	16.6	6	16	10	28	209	9.6
Chelmsford R. . . . .	43,840	44,960	+ 802	820	18.2	17	20	15	18	502	11.2
Dunmow R. . . . .	20,820	21,090	+ 157	313	14.8	9	28	9	29	200	9.5
Maldon R. . . . .	15,870	15,970	+ 55	264	16.5	5	19	7	26	219	13.7
Safron Walden R. . . . .	17,870	17,920	+ 72	324	18.1	3	9	4	12	202	11.3
Epping and Ongar R. (East)	17,380	17,890		Total figures for Epping and Ongar R. given below							
<b>2. Mid-Essex</b>	<b>231,480</b>	<b>236,120</b>	<b>+ 2,745</b>	<b>3,841</b>	<b>17.6</b>	<b>71</b>	<b>18.1</b>	<b>82</b>	<b>21.3</b>	<b>2,456</b>	<b>11.2</b>
Basildon U. . . . .	78,210	84,070	+ 4,411	2,117	25.2	41	19	37	17	668	7.9
Benfleet U. . . . .	28,250	30,140	+ 1,695	555	18.4	11	19	10	18	360	11.9
Canvey Island U. . . . .	13,170	14,850	+ 1,577	261	17.6	2	8	7	27	158	10.6
Rayleigh U. . . . .	17,700	19,180	+ 1,318	341	17.7	12	34	5	15	179	9.3
Rochford R. . . . .	26,930	28,880	+ 1,808	527	18.3	7	13	11	21	385	13.3
<b>3. South-East Essex</b>	<b>164,260</b>	<b>177,120</b>	<b>+ 10,809</b>	<b>3,801</b>	<b>21.5</b>	<b>73</b>	<b>18.8</b>	<b>70</b>	<b>18.4</b>	<b>1,750</b>	<b>9.9</b>
Brentwood U. . . . .	46,270	47,450	+ 865	847	17.8	12	14	12	14	532	11.2
Hornchurch U. . . . .	122,600	124,590	+ 670	2,437	19.6	41	16	46	19	1,117	9.0
Thurrock U. . . . .	107,100	109,710	+ 1,557	1,895	17.3	36	19	37	20	842	7.7
<b>4. South Essex</b>	<b>275,970</b>	<b>281,750</b>	<b>+ 3,092</b>	<b>5,179</b>	<b>18.4</b>	<b>89</b>	<b>16.9</b>	<b>95</b>	<b>18.3</b>	<b>2,491</b>	<b>8.8</b>
Chingford B. . . . .	46,030	46,140	+ 145	607	13.2	7	11	10	16	352	7.6
Wanstead and Woodford B. . . . .	61,620	61,500	+ 189	807	13.1	11	13	16	20	738	12.0
Chigwell U. . . . .	62,070	63,020	+ 594	798	12.7	8	10	12	15	442	7.0
Epping U. . . . .	9,190	9,490	+ 185	188	19.8	2	11	3	16	73	7.7
Harlow U. . . . .	45,250	49,000	+ 2,574	1,365	27.9	24	17	17	12	189	3.9
Waltham Holy Cross U. . . . .	11,470	11,980	+ 342	254	21.2	6	23	3	12	86	7.2
Epping and Ongar R. (West)	16,490	16,980		Total figures for Epping and Ongar R. given below							
<b>5. Forest</b>	<b>252,120</b>	<b>258,110</b>	<b>+ 3,361</b>	<b>4,019</b>	<b>16.7</b>	<b>58</b>	<b>14.2</b>	<b>61</b>	<b>15.2</b>	<b>1,880</b>	<b>7.8</b>
Epping and Ongar R.	33,870	34,870	+ 638	684	19.6	10	14	7	10	322	9.2
<b>6. Romford B.</b>	<b>114,800</b>	<b>115,840</b>	<b>— 276</b>	<b>2,106</b>	<b>18.2</b>	<b>30</b>	<b>14.0</b>	<b>43</b>	<b>20.4</b>	<b>790</b>	<b>6.8</b>
<b>7. Barking B.</b>	<b>74,980</b>	<b>74,920</b>	<b>— 361</b>	<b>996</b>	<b>13.3</b>	<b>20</b>	<b>19.7</b>	<b>18</b>	<b>18.1</b>	<b>695</b>	<b>9.3</b>
<b>8. Dagenham B.</b>	<b>114,200</b>	<b>114,760</b>	<b>— 75</b>	<b>1,518</b>	<b>13.2</b>	<b>38</b>	<b>24.4</b>	<b>42</b>	<b>27.7</b>	<b>883</b>	<b>7.7</b>
<b>9. Ilford B.</b>	<b>178,600</b>	<b>178,520</b>	<b>— 621</b>	<b>2,512</b>	<b>14.1</b>	<b>37</b>	<b>14.5</b>	<b>45</b>	<b>17.9</b>	<b>1,971</b>	<b>11.0</b>
<b>10. Leyton B.</b>	<b>97,830</b>	<b>96,870</b>	<b>— 825</b>	<b>1,260</b>	<b>13.0</b>	<b>21</b>	<b>16.4</b>	<b>28</b>	<b>22.2</b>	<b>1,395</b>	<b>14.4</b>
<b>11. Walthamstow B.</b>	<b>113,000</b>	<b>111,610</b>	<b>— 1,681</b>	<b>1,428</b>	<b>12.8</b>	<b>19</b>	<b>13.1</b>	<b>26</b>	<b>18.2</b>	<b>1,137</b>	<b>10.2</b>
<b>ADMINISTRATIVE COUNTY</b>	<b>1,811,000</b>	<b>1,843,360</b>	<b>+ 20,514</b>	<b>30,195</b>	<b>16.4</b>	<b>517</b>	<b>16.8</b>	<b>563</b>	<b>18.6</b>	<b>18,349</b>	<b>10.0</b>
<b>Administrative County, 1959</b>	<b>1,811,000</b>	<b>—</b>	<b>+ 17,919</b>	<b>28,808</b>	<b>15.9</b>	<b>522</b>	<b>17.8</b>	<b>576</b>	<b>20.0</b>	<b>18,727</b>	<b>10.3</b>

\* per 1,000 estimated population

† per 1,000 total births

‡ per 1,000 live births

TABLE II—CAUSES OF DEATH BY AGE, 1960

	Male										Female									
	0-	1-	5-	15-	25-	45-	65-	75+	Total		0-	1-	5-	15-	25-	45-	65-	75+	Total	
1. Tuberculosis—respiratory	—	—	—	—	7	28	30	14	79		—	—	—	1	12	6	7	1	27	
2. Tuberculosis—other	—	—	—	—	1	2	3	—	6		—	—	—	—	1	1	3	1	6	
3. Syphilitic disease	—	—	—	—	—	9	7	6	22		—	—	—	—	1	2	5	1	9	
4. Diphtheria	—	—	—	—	—	—	—	—	—		1	1	—	—	—	—	—	—	1	
5. Whooping Cough	—	—	—	—	—	—	—	—	—		—	—	—	—	—	—	—	—	—	
6. Meningococcal infections	—	—	—	—	1	—	—	—	1		—	—	—	—	—	—	—	—	—	
7. Acute poliomyelitis	—	—	—	—	—	—	—	—	—		—	—	—	—	—	—	—	—	—	
8. Measles	—	—	—	—	—	—	—	—	—		—	—	—	—	—	—	—	—	—	
9. Other infective and parasitic diseases	1	1	1	3	2	10	1	1	20		1	3	—	1	1	8	2	3	19	
10. Malignant neoplasm, stomach	—	—	—	—	10	125	96	61	292		—	—	—	1	5	39	75	95	215	
11. Malignant neoplasm, lung and bronchus	—	—	—	—	22	378	256	103	759		—	—	—	—	6	55	44	34	139	
12. Malignant neoplasm, breast	—	—	—	—	—	—	2	1	3		—	—	—	—	35	182	80	87	384	
13. Malignant neoplasm, uterus	—	1	3	6	43	303	277	291	924		1	2	4	2	51	256	241	278	835	
14. Other malignant and lymphatic neoplasms	—	—	—	—	7	22	18	9	70		1	3	2	5	4	13	14	9	51	
15. Leukaemia and aleukaemia	1	1	9	3	7	10	20	14	46		—	—	—	—	3	8	19	38	68	
16. Diabetes	—	—	—	—	2	10	—	—	—		—	—	—	—	—	—	—	—	—	
17. Vascular lesions of nervous system	—	—	1	1	13	181	276	471	943		1	—	2	—	18	203	348	928	1,500	
18. Coronary disease, angina	—	—	—	1	58	734	666	610	2,069		—	—	—	—	4	181	402	614	1,201	
19. Hypertension with heart disease	—	—	—	—	1	25	58	64	148		—	—	—	—	—	29	53	132	214	
20. Other heart disease	—	—	1	3	16	103	168	540	831		1	—	1	1	25	96	231	1,061	1,416	
21. Other circulatory disease	1	—	—	1	12	74	111	180	379		—	—	1	—	11	54	112	326	504	
22. Influenza	—	1	—	—	1	8	—	3	13		1	1	—	—	—	6	3	7	18	
23. Pneumonia	35	4	6	1	10	55	110	225	446		28	7	—	—	12	40	87	390	564	
24. Bronchitis	8	4	1	—	5	142	222	231	613		6	—	—	—	2	32	55	147	242	
25. Other diseases of respiratory system	1	1	2	1	4	28	40	23	100		1	2	—	—	—	1	15	13	33	
26. Ulcer of stomach and duodenum	—	—	—	—	6	29	37	33	105		—	—	—	—	4	11	17	34	66	
27. Gastritis, enteritis and diarrhoea	4	1	1	1	2	11	10	7	37		—	1	—	1	2	13	10	32	59	
28. Nephritis and nephrosis	—	—	2	5	12	23	7	21	70		—	—	—	1	5	17	6	18	47	
29. Hyperplasia of prostate	—	—	—	—	—	6	29	81	116		—	—	—	—	—	—	—	—	—	
30. Pregnancy, childbirth, abortion	—	—	—	—	—	—	—	—	—		—	—	—	1	5	—	—	—	6	
31. Congenital malformations	70	11	6	2	6	14	7	1	117		48	12	7	2	6	5	2	—	82	
32. Other defined and ill-defined diseases	199	3	9	15	25	119	119	209	698		135	7	11	10	42	133	154	364	856	
33. Motor vehicle accidents	—	4	13	33	35	41	13	20	159		—	—	7	9	5	15	12	16	64	
34. All other accidents	10	3	11	16	28	32	12	33	145		7	4	1	2	6	26	22	85	153	
35. Suicide	—	—	—	5	22	47	21	6	101		—	—	—	2	28	42	12	—	84	
36. Homicide and operations of war	1	—	—	—	—	—	—	—	1		—	—	—	—	1	—	—	1	2	
<b>All causes</b>	<b>331</b>	<b>35</b>	<b>66</b>	<b>97</b>	<b>351</b>	<b>2,559</b>	<b>2,616</b>	<b>3,258</b>	<b>9,313</b>		<b>232</b>	<b>43</b>	<b>37</b>	<b>40</b>	<b>309</b>	<b>1,536</b>	<b>2,070</b>	<b>4,769</b>	<b>9,036</b>	
All causes {	1959	331	63	62	110	390	2,678	2,673	3,393	9,700	245	40	45	31	265	1,581	2,085	4,735	9,027	
	1958	283	53	55	105	345	2,494	2,612	3,388	9,335	217	45	48	49	279	1,573	2,082	4,424	8,717	
	1957	301	60	69	97	372	2,547	2,597	3,243	9,286	212	44	42	43	344	1,659	2,048	4,233	8,625	
	1956	287	45	68	85	403	2,503	2,532	3,344	9,267	235	40	34	37	318	1,545	2,094	4,452	8,755	
	1955	334	55	65	79	401	2,333	2,474	3,114	8,555	204	46	46	46	332	1,527	1,956	4,193	8,350	



TABLE III—CAUSES OF DEATH BY HEALTH AREAS AND COUNTY DISTRICTS, 1960

Health Area and County District	Tuberculosis respiratory	Tuberculosis other	Syphilitic disease	Acute poliomyelitis	Other infective and parasitic diseases*	Malignant neo- plasm stomach	Malignant neo- plasm lung bronchus	Malignant neo- plasm, breast	Malignant neo- plasm, uterus	Other malignant and lymphatic neoplasms	Leukaemia leukaemia	Diabetes	Vascular lesions of nervous system	Coronary disease angina	Other heart and circulatory disease	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Ulcer of stomach and duodenum	Gastritis enteritis and diarrhoea	Nephritis and nephrosis	Hyperplasia of prostate	Pregnancy childbirth abortion	Congenital malformations	Motor vehicle accidents	All other accidents	Suicide	Other diseases	All causes	
Colchester B	4	—	2	1	—	22	20	6	4	57	3	9	105	113	147	1	35	25	6	7	3	9	3	—	5	4	21	6	61	679	
Harwich B	2	—	—	—	—	3	6	2	1	14	—	1	27	41	28	1	1	6	4	2	1	—	2	—	2	1	1	3	8	157	
Brightlingsea U	—	—	—	—	—	1	1	—	—	6	—	—	11	9	19	—	2	2	—	1	—	1	—	—	2	—	—	—	3	59	
Clacton U	4	2	—	—	1	15	15	4	3	35	2	3	72	103	97	2	8	16	6	3	2	4	2	—	4	6	5	4	31	449	
Printon and Walton U	1	—	—	—	—	1	11	4	2	14	2	—	27	36	37	1	8	3	3	—	1	—	—	—	3	1	2	3	7	167	
Halstead U	—	—	—	—	—	1	3	—	1	2	—	—	14	16	9	—	5	3	—	1	—	2	—	—	—	1	—	—	2	3	63
West Mersea U	1	—	—	—	—	1	1	1	1	3	—	—	7	7	8	—	4	1	1	1	—	—	1	—	—	—	—	—	—	2	40
Wivenhoe U	—	—	—	—	—	—	2	—	—	3	—	—	8	5	14	—	—	2	—	—	—	—	—	—	1	—	1	—	—	3	40
Halstead R	1	—	—	—	1	7	7	3	2	17	1	3	51	32	52	—	11	8	—	—	—	1	1	—	2	2	6	1	20	229	
Lexden and Winstree R	3	—	1	—	—	7	12	3	3	30	1	1	41	55	61	—	18	15	—	4	1	2	5	—	1	5	6	3	65	343	
Tendring R	4	—	1	—	2	6	10	4	3	33	2	4	78	55	73	1	10	12	3	5	1	—	1	—	1	5	5	2	32	353	
1. North-East Essex	20	2	4	1	4	64	88	27	20	214	11	21	441	472	545	6	102	93	23	24	9	19	16	—	21	25	48	24	235	2,579	
Chelmsford B	1	—	—	—	1	21	24	15	7	46	—	3	52	84	79	—	25	8	5	5	1	—	4	1	7	5	3	6	49	452	
Maldon B	—	1	—	—	—	3	5	1	1	15	1	—	29	23	42	—	4	3	1	2	—	—	1	—	1	4	3	1	12	153	
Saffron Walden B	—	—	—	—	—	1	2	2	—	9	2	2	8	16	16	—	17	2	3	—	2	—	2	—	1	1	—	1	14	101	
Braintree & Bocking U	1	—	1	—	—	8	6	6	3	26	3	2	42	35	60	—	8	7	2	2	1	1	—	—	4	—	4	1	32	255	
Burnham-on-Crouch U	—	—	1	—	—	3	3	—	1	4	—	—	13	9	11	—	—	2	—	—	—	—	2	—	—	1	1	1	1	53	
Witham U	1	—	—	—	—	3	5	4	1	9	1	2	16	17	17	1	7	5	—	—	1	1	—	—	1	—	3	4	11	110	
Braintree R	—	—	—	—	1	2	5	—	1	31	2	1	26	29	48	—	11	7	1	—	3	—	1	—	—	6	5	1	28	209	
Chelmsford R	1	—	—	—	—	13	18	10	5	42	4	2	59	109	90	1	36	12	3	3	2	2	8	—	7	4	11	7	53	502	
Dunmow R	1	—	1	—	—	14	4	1	1	24	1	1	29	34	39	—	13	2	2	1	1	1	2	—	1	2	3	3	19	200	
Maldon R	1	—	—	—	—	6	5	4	2	19	—	2	38	33	53	—	11	14	1	1	—	2	2	—	3	1	1	1	19	219	
Saffron Walden R	—	—	—	—	—	5	11	5	—	18	3	2	29	38	41	—	8	7	1	2	1	1	3	—	2	1	10	2	12	202	
2. Mid-Essex	6	1	3	—	2	79	88	48	22	243	17	17	341	427	496	2	140	69	19	16	12	8	25	1	27	25	44	28	250	2,456	
Basildon U	—	1	1	—	—	2	20	34	20	7	68	5	4	73	155	90	—	30	36	6	9	—	7	4	1	6	8	11	7	63	668
Benfleet U	3	—	—	—	—	9	20	10	—	38	3	3	49	75	65	—	22	12	3	3	2	2	2	1	3	3	3	3	26	360	
Canvey Island U	3	—	—	—	—	2	12	2	—	17	1	—	26	34	16	—	18	4	1	2	—	1	2	—	2	1	5	1	8	158	
Rayleigh U	1	—	—	—	—	4	12	4	4	14	—	1	20	42	32	—	7	9	4	1	3	—	2	—	2	1	—	2	14	179	
Rochford R	2	—	—	—	1	7	22	5	2	31	—	1	56	83	55	1	30	15	6	5	1	6	3	—	1	1	11	4	36	385	
3. South-East Essex	9	1	1	—	3	42	100	41	13	168	9	9	224	389	258	1	107	76	20	20	6	16	13	2	14	14	30	17	147	1,750	
Brentwood U	5	—	1	—	2	7	14	9	2	56	2	3	61	87	100	—	69	25	4	7	6	1	2	—	4	11	12	2	40	532	
Hornchurch U	9	1	2	—	3	19	62	29	11	114	9	3	162	196	190	—	39	65	8	9	4	9	7	—	13	19	18	9	107	1,117	
Thurrock U	5	1	4	—	4	17	39	14	7	87	7	6	89	146	143	1	61	31	7	11	6	7	6	—	17	12	27	7	80	842	
4. South Essex	19	2	7	—	9	43	115	52	20	257	18	12	312	429	433	1	169	121	19	27	16	17	15	—	34	42	57	18	227	2,491	
Chingford B	1	—	—	—	1	16	15	16	3	35	1	1	44	71	74	3	12	12	3	2	—	3	1	—	4	6	2	3	23	352	
Wanstead & Woodford B	7	—	—	—	1	17	37	24	6	73	3	2	104	132	142	3	35	32	3	7	5	3	7	—	6	13	13	14	49	738	
Chigwell U	4	—	1	—	2	11	20	16	6	47	4	3	60	75	67	—	24	27	7	1	5	3	2	1	5	8	4	3	36	442	
Epping U	1	—	—	—	—	5	4	1	—	7	—	2	8	17	8	1	2	3	—	—	—	—	1	—	2	1	1	1	8	73	
Harlow U	—	1	—	—	1	4	12	5	1	17	3	—	18	36	26	—	10	7	2	2	3	—	3	—	9	3	4	4	18	189	
Waltham Holy Cross U	2	—	—	—	—	5	—	—	1	11	—	1	11	13	13	—	2	4	2	1	1	2	1	—	2	3	2	1	8	86	
5. Forest	15	1	1	—	5	53	93	62	17	190	11	9	245	344	330	7	85	85	17	13	14	11	15	1	28	34	26	26	142	1,880	
Epping & Ongar R	—	1	—	—	1	3	16	6	4	42	3	3	41	55	56	—	20	11	3	1	1	—	—	—	3	8	10	2	32	322	
6. Romford B	7	2	3	—	1	15	41	17	6	74	9	11	100	140	124	1	37	48	4	7	1	12	5	—	13	19	17	5	71	790	
7. Barking B	4	—	—	—	1	27	59	19	8	84	6	3	84	109	99	1	32	43	16	5	4	8	2	1	7	9	10	10	44	695	
8. Dagenham B	6	—	2	—	5	38	72	15	5	87	7	11	77	161	142	1	46	56	11	10	5	6	7	—	11	8	10	10	74	883	
9. Ilford B	7	1	5	—	4	66	89	36	9	200	12	7	252	350	393	4	127	102	20	21	9	10	5	1	17	20	20	22	162	1,971	
10. Leyton B	6	—	4	—	2	46	70	31	7	100	9	6	200	190	380	4	76	73	8	15	10	5	8	—	9	9	14	13	100	1,395	
11. Walthamstow B	7	1	1	—	4	31	67	33	7	100	9	5	126	204	236	3	69	78	5	12	9	5	5	—	15	10	12	10	73	1,137	
ADMINISTRATIVE COUNTY	106	12	31	1	41*	507	898	387	138	1,759	121	114	2,443	3,270	3,492	31	1,010	855	165	171	96	117	116	6	199	223	298	185	1,557	18,349	
Administrative County, 1959	106	8	43	7	43	532	881	368	130	1,736	112	120	2,426	3,102	3,652	249	1,174	968	184	169	95	103	117	8	170	193	295	173	1,563	18,727	

\* including meningococcal infections 6, measles 5

TABLE IV—INFECTIOUS AND OTHER NOTIFIABLE DISEASES, 1960

Health Area and County District	Scarlet fever	Whooping cough	Measles	Acute pneumonia	Tuberculosis respiratory	Tuberculosis meninges and C.N.S.	Tuberculosis other	Meningeococcal infection	Acute poliomyelitis (paralytic)	Acute poliomyelitis (non-paralytic)	Dysentery	Ophthalmia neonatorum	Puerperal pyrexia	Para-typhoid fevers	Erysipelas	Food poisoning	Infective hepatitis	Others †	Total
Colchester B. ....	108	197	344	13	15	—	1	1	—	—	6	—	15	—	3	1	14	—	718
Harwich B. ....	12	8	6	8	7	—	1	—	—	—	1	—	4	—	—	—	1	—	48
Brightlingsea U. ....	—	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7
Clacton U. ....	11	38	24	—	6	—	2	1	—	—	—	—	1	—	—	—	—	1	84
Frinton & Walton U. ....	2	4	2	2	2	—	1	—	—	—	3	—	—	—	1	2	—	—	19
Halstead U. ....	1	1	13	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	16
West Mersea U. ....	1	5	27	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	34
Wivenhoe U. ....	2	24	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	28
Halstead R. ....	4	64	93	2	4	—	—	—	—	—	—	—	—	—	1	2	1	—	171
Lexden & Winstree R. ....	45	47	44	8	1	—	1	—	—	—	1	—	—	—	3	—	10	—	160
Tendring R. ....	42	73	32	14	7	—	3	—	—	—	33	—	2	—	2	1	1	1	211
<b>1. North-East Essex</b>	<b>228</b>	<b>468</b>	<b>586</b>	<b>48</b>	<b>43</b>	—	<b>9</b>	<b>2</b>	—	—	<b>44</b>	—	<b>22</b>	—	<b>10</b>	<b>6</b>	<b>28</b>	<b>2</b>	<b>1,496</b>
Chelmsford B. ....	53	104	180	6	17	1	4	—	—	1	46	1	—	—	1	2	3	—	419
Maldon B. ....	5	1	—	5	5	—	—	1	—	—	110	—	1	—	—	1	—	1	130
Saffron Walden B. ....	1	—	67	—	1	—	1	—	—	—	69	—	—	—	1	5	—	—	145
Braintree & Bocking U. ....	7	1	6	—	10	—	—	—	—	1	—	—	—	—	—	—	—	—	25
Burnham-on-Crouch U. ....	—	5	—	13	1	—	—	—	—	—	6	—	—	—	1	—	—	—	26
Witham U. ....	7	16	—	—	6	—	1	—	—	—	—	—	—	—	1	—	—	—	31
Braintree R. ....	17	29	1	—	8	—	2	—	—	—	1	—	—	—	1	—	—	—	59
Chelmsford R. ....	43	42	28	3	17	1	1	1	2	—	19	—	1	—	4	9	1	—	172
Dunmow R. ....	10	18	127	4	2	—	—	—	—	—	3	—	—	—	—	1	—	1	166
Maldon R. ....	29	20	3	25	1	—	1	—	—	—	42	—	—	—	4	3	1	—	129
Saffron Walden R. ....	13	57	63	6	3	1	—	—	—	—	10	—	—	—	—	6	4	—	163
<b>2. Mid-Essex</b>	<b>185</b>	<b>293</b>	<b>475</b>	<b>62</b>	<b>71</b>	<b>3</b>	<b>10</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>306</b>	<b>1</b>	<b>2</b>	—	<b>13</b>	<b>27</b>	<b>9</b>	<b>2</b>	<b>1,465</b>
Basildon U. ....	160	260	481	9	27	—	8	—	—	—	46	—	12	—	2	—	—	—	1,005
Benfleet U. ....	35	61	36	6	5	—	2	1	—	—	11	—	1	—	4	—	3	—	165
Canvey Island U. ....	13	17	172	5	5	—	2	—	—	1	3	—	—	—	1	2	—	—	221
Rayleigh U. ....	11	18	3	4	9	—	1	—	—	—	4	—	—	—	6	—	—	—	56
Rochford R. ....	34	61	7	1	13	—	1	—	1	—	16	1	124	—	3	7	6	2	277
<b>3. South-East Essex</b>	<b>253</b>	<b>417</b>	<b>699</b>	<b>25</b>	<b>59</b>	—	<b>14</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>80</b>	<b>1</b>	<b>137</b>	—	<b>16</b>	<b>9</b>	<b>9</b>	<b>2</b>	<b>1,724</b>
Brentwood U. ....	16	172	40	16	17	—	—	—	—	—	90	—	—	—	1	9	—	—	361
Hornchurch U. ....	234	237	23	6	43	1	3	2	1	—	79	1	—	1	11	13	33	2	690
Thurrock U. ....	94	198	67	81	46	—	10	—	—	—	90	—	10	—	5	138	—	2	741
<b>4. South Essex</b>	<b>344</b>	<b>607</b>	<b>130</b>	<b>103</b>	<b>106</b>	<b>1</b>	<b>13</b>	<b>2</b>	<b>1</b>	—	<b>259</b>	<b>1</b>	<b>10</b>	<b>1</b>	<b>17</b>	<b>160</b>	<b>33</b>	<b>4</b>	<b>1,792</b>
Chingford B. ....	138	93	26	12	14	—	2	1	—	—	43	—	1	—	6	1	*	2	339
Wanstead & Woodford B. ....	18	62	35	6	23	—	3	—	2	—	37	—	27	1	10	12	*	—	236
Chigwell U. ....	85	71	275	15	29	—	2	—	—	—	209	1	—	—	4	18	*	—	709
Epping U. ....	14	34	1	—	6	—	2	—	—	—	34	—	1	—	—	—	—	—	92
Harlow U. ....	138	187	326	11	19	—	4	1	—	—	17	—	1	—	6	15	29	2	756
Waltham Holy Cross U. ....	9	4	2	3	3	—	1	1	1	—	9	—	—	—	—	—	*	—	33
<b>5. Forest</b>	<b>402</b>	<b>451</b>	<b>665</b>	<b>47</b>	<b>94</b>	—	<b>14</b>	<b>3</b>	<b>3</b>	—	<b>349</b>	<b>1</b>	<b>30</b>	<b>1</b>	<b>26</b>	<b>46</b>	<b>29</b>	<b>4</b>	<b>2,165</b>
Epping & Ongar R. ....	15	75	99	1	13	—	—	—	—	—	124	—	—	—	—	5	3	—	335
<b>6. Romford B.</b>	<b>145</b>	<b>387</b>	<b>195</b>	<b>18</b>	<b>50</b>	<b>1</b>	<b>3</b>	<b>1</b>	—	<b>1</b>	<b>760</b>	<b>3</b>	<b>3</b>	—	<b>7</b>	<b>49</b>	—	<b>1</b>	<b>1,624</b>
<b>7. Barking B.</b>	<b>98</b>	<b>94</b>	<b>36</b>	<b>35</b>	<b>41</b>	—	<b>3</b>	—	—	—	<b>22</b>	—	<b>9</b>	—	<b>1</b>	<b>4</b>	<b>*</b>	<b>8</b>	<b>351</b>
<b>8. Dagenham B.</b>	<b>122</b>	<b>261</b>	<b>23</b>	<b>35</b>	<b>47</b>	—	<b>5</b>	<b>1</b>	—	—	<b>62</b>	<b>2</b>	<b>2</b>	—	<b>8</b>	<b>8</b>	<b>*</b>	<b>1</b>	<b>577</b>
<b>9. Ilford B.</b>	<b>234</b>	<b>397</b>	<b>73</b>	<b>92</b>	<b>60</b>	<b>1</b>	<b>8</b>	<b>1</b>	<b>1</b>	—	<b>204</b>	<b>6</b>	<b>47</b>	—	<b>14</b>	<b>117</b>	<b>*</b>	<b>8</b>	<b>1,263</b>
<b>10. Leyton B.</b>	<b>50</b>	<b>42</b>	<b>215</b>	<b>47</b>	<b>40</b>	<b>1</b>	<b>6</b>	<b>1</b>	<b>1</b>	—	<b>31</b>	<b>3</b>	<b>2</b>	—	<b>6</b>	<b>11</b>	<b>*</b>	<b>1</b>	<b>457</b>
<b>11. Walthamstow B.</b>	<b>178</b>	<b>242</b>	<b>200</b>	<b>36</b>	<b>41</b>	—	<b>10</b>	—	<b>2</b>	—	<b>130</b>	<b>9</b>	<b>26</b>	<b>10</b>	<b>12</b>	<b>67</b>	<b>*</b>	<b>6</b>	<b>969</b>
<b>ADMINISTRATIVE COUNTY</b>	<b>2,254</b>	<b>3,734</b>	<b>3,396</b>	<b>549</b>	<b>665</b>	<b>7</b>	<b>95</b>	<b>14</b>	<b>11</b>	<b>4</b>	<b>2,371</b>	<b>27</b>	<b>290</b>	<b>12</b>	<b>130</b>	<b>509</b>	<b>111</b>	<b>39†</b>	<b>14,218</b>
<b>Administrative County, 1959</b>	<b>2,982</b>	<b>778</b>	<b>29,202</b>	<b>1,238</b>	<b>666</b>	<b>2</b>	<b>64</b>	<b>23</b>	<b>43</b>	<b>21</b>	<b>858</b>	<b>20</b>	<b>459</b>	<b>15</b>	<b>147</b>	<b>532</b>	<b>33</b>	<b>26</b>	<b>37,109</b>

† Including Diphtheria 5, Acute Encephalitis infective 5, post-infectious 10, Enteric or Typhoid fevers 2.

\* Not notifiable in these districts, therefore the total for the County of 111 is incomplete.



TABLE V—MENTAL DEFICIENCY ACTS, 1913-1938

	Under 16 years		16 years and over	
	M	F	M	F
<i>Particulars of cases reported during the period 1.1.60 to 31.10.60</i>				
(a) Cases ascertained to be defectives "subject to be dealt with":—				
Number in which action taken on reports by:—				
(1) Local Education Authorities on children:—				
(i) While at school or liable to attend school .....	48	41	—	—
(ii) On leaving special schools .....	3	3	—	—
(iii) On leaving ordinary schools .....	—	3	—	—
(2) Police or by Courts .....	—	—	4	—
(3) Other sources .....	3	7	2	1
TOTAL of 1(a) .....	54	54	6	1
(b) Cases reported who were found to be defectives but were not regarded as "subject to be dealt with" on any ground .....	35	24	18	28
(c) Cases reported who were not regarded as defectives and are thus excluded from (a) or (b) .....	4	4	—	—
(d) Cases reported in which action was incomplete at 31st October, 1960, and are thus excluded from (a) or (b) .....	14	26	21	22
TOTAL 1(a)—(d) inclusive .....	107	108	45	51
<i>Disposal of cases reported during the period 1.1.60 to 31.10.60</i>				
(a) Of the cases ascertained to be defectives "subject to be dealt with" (i.e. at 1(a)), number—				
(i) Placed under Statutory Supervision .....	53	52	—	—
(ii) Placed under Guardianship .....	—	—	—	—
(iii) Taken to "Places of Safety" .....	—	—	—	—
(iv) Admitted to Hospitals .....	1	2	6	1
TOTAL of 2(a) .....	54	54	6	1

TABLE V (continued)

	Under 16 years		16 years and over	
	M	F	M	F
(b) Of the cases not ascertained to be defectives "subject to be dealt with" (i.e. at 1(b)), number—				
(i) Placed under Voluntary Supervision .....	32	22	17	28
(ii) Action unnecessary .....	3	2	1	—
TOTAL of 2(b) .....	35	24	18	28
(c) Cases reported at 1(a) or (b) above who removed from the area or died before disposal was arranged .....	—	—	—	—
TOTAL 2(a)—(c) inclusive .....	89	78	24	29



	MENTALLY ILL				PSYCHOPATH				SUBNORMAL & SEVERELY SUBNORMAL				TOTALS			
	Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)
(a) Receiving training or occupation in day centre Awaiting training or occupation in day centre									260	198	211	181	260	198	211	181
(b) Receiving training or occupation in residential centre Awaiting training or occupation in residential centre									14	5	5	8	14	5	5	8
(c) Receiving home training ..... Awaiting home training .....									6	3	10	15	6	3	10	15
(d) Resident in L.A. home/hostel Awaiting residence in L.A. home/hostel																
(e) Resident at L.A. expense in private residential home				1					1	1	2		1	1	2	1
(f) Resident at L.A. expense by boarding out in private home									1	1			1	1		
(g) Receiving home visits and not included under (a) to (f)									163	185	1,149	1,085	163	185	1,149	1,085
(h) Number of Patients involved at (a) to (g)				1					459	411	1,404	1,301	459	411	1,404	1,302





TABLE VII—RURAL HOUSING PROGRESS, 1960

DWELLING-HOUSES DEMOLISHED CLOSED OR REPAIRED DURING 1960				RURAL DISTRICTS										Totals			
				Braintree	Chelmsford	Dunmow	Epping and Ongar	Halstead	Leaden and Winstree	Malden	Rochford	Saffron Walden	Tendring				
Houses Demolished	In Clearance Areas	Housing Act, 1957	(i) Dwelling-houses demolished	Unfit Houses	—	—	8	4	—	3	—	—	2	—	17		
				Other Houses	—	—	—	—	—	—	—	—	—	—	—		
Persons Displaced	—			—	—	8	—	—	—	—	—	3	11				
Houses and parts of buildings closed	Houses not in Clearance Areas		(ii) Houses demolished as a result of formal or informal action	Houses	13	22	37	9	22	13	13	26	5	17	177		
				Persons Displaced	—	4	—	23	30	6	13	29	1	52	158		
				(iii) Houses closed in pursuance of under- takings and as a result of Closing Orders	Houses	7	—	6	7	62	45	7	—	7	5	146	
			Persons Displaced		2	—	—	24	—	100	4	—	4	28	162		
			(iv) Parts of Buildings Closed (S.18)		Houses	—	1	—	—	—	—	—	—	—	—	1	
				Persons Displaced	—	2	—	—	—	—	—	—	—	—	2		
		(v) Houses in which defects were remedied after service of formal notice		By Owners	1	6	—	—	12	5	—	—	2	—	26		
			By L.A. in default	—	—	—	—	—	—	—	—	—	—	—			
			(vi) Houses reconstructed, enlarged or improved and Demolition Orders revoked (S.24)	—	—	—	3	—	—	—	—	3	—	6			
Houses Rendered Fit	Houses not in Clearance Areas	Public Health Acts	(vii) Houses in which defects were remedied after service of formal notice	—	39	3	3	—	—	2	—	—	1	48			
			Hsg or P Health Acts	(viii) Houses rendered fit after informal action by L.A.	57	36	18	84	132	210	95	19	23	25	699		
				(ix) Houses purchased by L.A. and retained for temporary accommodation (S.17(2))	Houses	—	—	—	—	—	—	—	—	—	—	—	
		Separate Dwellings			—	—	—	—	—	—	—	—	—	—	—	—	
		(x) Houses owned by L.A. retained for temporary accommodation	Houses		—	—	—	—	—	—	—	—	—	—	—	—	
			Separate Dwellings	—	—	—	—	—	—	—	—	—	—	—	—	—	
			(xi) Houses not owned by L.A. retained for temporary accommodation (S.46)	Houses	—	—	—	—	—	—	—	—	—	—	—	—	—
		Separate Dwellings		—	—	—	—	—	—	—	—	—	—	—	—	—	—
		(xii) Houses licensed for temporary accommodation (Ss. 34 or 35)		—	—	1	—	—	—	—	—	—	—	—	—	1	
Houses in Temporary Use	Houses in Clearance Areas	Housing Act, 1957															
(a) Total number of houses demolished or closed since 1st January, 1956 .....					168	81	343	146	261	211	107	152	178	131	1,778		
(b) Estimated number of houses remaining unfit for human habitation .....					*	106	294	60	460	259	221	56	130	99			
(c) Period of years considered necessary for dealing with (b) .....					*	5	5	4	5	3	5	3	5	†			

† No estimate available at present

\* Housing survey in course of revision





TABLE VIII—HOUSING IMPROVEMENT GRANTS, 1960

RURAL DISTRICT	Total of Grants made to 31.12.60 £	HOUSING (FINANCIAL PROVISIONS) ACT, 1958					HOUSE PURCHASE AND HOUSING ACT, 1959			Total of all Grants Paid £
		Applications Received		Applications Approved		Applications Received	Applications Approved			
		Dwellings Concerned		No. of Dwellings	Total of Grants Paid £					
		Conver- sions	Improve- ments							
Braintree .....	64,938	7	26	35	9,724	18	15	1,387	76,049	
Chelmsford .....	171,435	—	88	84	24,368	58	21	2,697	198,500	
Dunmow .....	106,711	4	56	55	14,467	26	17	1,971	123,149	
Epping & Ongar .....	53,267	—	47	47	15,620	88	9	926	69,813	
Halstead .....	63,881	8	22	25	7,748	43	14	1,564	73,193	
Lexden & Winstree .....	86,836	—	50	50	15,338	46	26	2,910	105,084	
Maldon .....	29,792	—	51	51	13,344	19	16	1,601	44,737	
Rochford .....	34,621	1	16	28	4,879	54	17	1,552	41,052	
Saffron Walden .....	75,499	3	44	44	13,084	33	24	2,581	91,164	
Tendring .....	27,265	—	20	19	5,110	69	32	3,461	35,836	
TOTALS .....	714,245	23	420	438	123,682	454	191	20,650	858,577	

**TABLE IX—RURAL HOUSING**  
**Number of Houses Erected During 1960 and the Number of Applicants**  
**remaining on Waiting Lists**

Rural Districts	No. of houses erected during the year ended 31st December, 1960		No. of applicants on waiting list for Council houses at 31st December, 1960, who are in urgent need of housing accommodation
	By the Council	By Private Enterprise	
Braintree	26 (14)	115 (5)	118 (123)
Chelmsford	67 (103)	408 (275)	400 (800)
Dunmow	24 (—)	80 (76)	50 (60)
Epping and Ongar	54 (48)	257 (209)	300 (500)
Halstead	38 (28)	51 (32)	100 (75)
Lexden and Winstree	83 (3)	100 (98)	200 (370)
Maldon	13 (42)	60 (67)	21 (21)
Rochford	22 (45)	457 (527)	110 (420)
Saffron Walden	10 (6)	71 (58)	86 (75)
Tendring	12* (22)	149 (11)	842 (460)
Totals	349 (311)	1,748 (1,358)	2,227 (2,904)

\* Plus one hostel of 34 units. Note: 1959 figures are given in parenthesis



## INDEX

	Page No.		Page No.
Accidents .....	5, 21, 97, 98	District nurses, training of .....	58
Acreage .....	13	Domestic help service .....	73, 78
Aged, hostel accommodation for .....	76	Essex Epidemiological Committee .....	70
Airport, health control at .....	66	Establishments for massage and special treatment .....	49
Ambulance Service .....	23, 26, 29, 80	Factories Acts, 1937 and 1948 .....	76
Analgesia .....	56	Families, prevention of break-up of .....	78
Ante-natal clinics .....	56	Fluorine and dental caries .....	94
Area Medical Officers .....	12, 23, 27	Food and drugs .....	35
„ staff .....	13	Handicapped children, assessment centre for .....	6, 54
Assistant County Medical Officers 24, 66, 93		Health area staff .....	13
Atmospheric Pollution .....	48	„ centres .....	25
B.C.G. vaccination .....	64	„ Committee .....	9
Better Health .....	72	„ Department staff .....	10, 23
Birth rates .....	5, 14, 15, 96	„ education .....	71
Births, live .....	14, 15, 96	„ services clinics .....	26
„ still .....	5, 14, 16, 96	„ services, integration of .....	27
Blind, welfare of the .....	76	„ visiting .....	24, 59, 63, 78
Boarded-out children, medical exam- ination of .....	55	Home nursing .....	28, 58
Books for tuberculous patients .....	65	„ safety .....	72
Bradwell Nuclear Power Station .....	29	Hospital, care of patients discharged from .....	28
Bronchitis, deaths from .....	21, 97, 98	Hostel for the mentally disordered 27, 89	
Cancer education .....	72	Housing for nursing staff .....	27
„ mortality .....	5, 19, 97, 98	„ rural .....	48, 103, 104, 105
Child guidance .....	54	Ice cream .....	30, 31, 33
„ minders .....	53	„ lollies .....	31, 35
„ welfare centres .....	50	Illegitimacy .....	14, 16, 17, 57
Children Act, 1948 .....	55	Infant mortality .....	5, 14, 17, 96
Chiropody .....	24, 78	Infectious diseases .....	66, 99
Circulatory system, diseases of .....	20, 97, 98	Influenza .....	5, 21, 97, 98
Civil Defence .....	29	Kingsley Hall Day Centre for Handi- capped Children .....	6, 54
Colchester Comprehensive Training Centre .....	6, 87	Laboratory service .....	30
Combined Medical Service .....	23	Leukaemia .....	19, 97, 98
Convalescence .....	54, 66	Lunacy and mental treatment .....	85, 86
Coronary disease .....	20, 97, 98	Mass miniature radiography .....	65, 71
Daily guardians scheme .....	53	Massage, establishments for .....	49
Day centre for handicapped children .....	6, 54	Maternal mortality .....	5, 14, 21, 57, 97, 98
Day nurseries .....	26, 53	Maternity services .....	55
Decentralisation of administration .....	27	Medical examination of staff .....	25
Dental ancillaries .....	92	Medicaments, provision of .....	51
„ health education .....	7, 72, 93		
„ laboratories .....	93		
„ officers .....	23, 91		
„ treatment .....	51, 90		
Diphtheria immunisation .....	7, 68		
„ —outbreak of .....	7, 68		

	Page No.
Mental deficiency	85, 87, 100, 101, 102
„ „ —hospital accommodation and waiting lists	86
Mental health	6, 83, 102
„ Health Act, 1959	6, 84
„ hospital admissions and accommodation	86
Midwifery	55
Milk supply	30, 31, 35
„ for tuberculous patients	65
Morbidity statistics	22
Mortality at all ages	96
„ by age and sex	18, 97
„ from all causes	5, 14, 18, 97, 98
„ in county districts and health areas	98
„ rates	5, 18, 96
Mothercraft courses	60
Motor transport for staff	25
„ vehicle accidents	5, 21, 97, 98
National Assistance Act, 1948	76
Neo-natal mortality	14, 17
Night attendance service	6, 75
Nurseries and child minders	53
Nursing agencies	79
„ homes	79
Nutriments, provision of	51
Occupational therapy	64
Open-air shelters	64
Ophthalmia neonatorum	57, 99
Orthodontics	92
Overseas visitors	28
Partially-sighted persons	76
Perinatal mortality	5, 14, 17
Phenylpyruvic oligophrenia	52
Pneumonia	21, 97, 98
Poliomyelitis vaccination	68
Population	5, 14, 96
Post-natal clinics	56
Preface	5
Premature babies	16
Preventive medicine, care and after-care	61
Problem families	78
Public Health (Aircraft) Regulations, 1952 and 1954	66
Puerperal pyrexia	57, 99
Pupil midwives, training of	58

	Page No.
Recuperative holidays	66
Refresher courses	24, 93
Refuse disposal	47
Rehabilitation of tuberculous patients	65
Relaxation courses	60
Residential hostels for the mentally disordered	27, 89
Residential nurseries	55
Respiratory system, diseases of	5, 21, 97, 98
Rural housing	48, 103, 104, 105
„ water supplies and sewerage	43
Sewerage and sewage disposal	30, 31, 42
Sickness claims	22
Sickroom equipment	66
Sites and buildings	25
Slum clearance	48, 103
Smallpox, vaccination against	67
Social after-care of mental patients	84, 89
Staff of Health Department	10, 23
Statistics, vital	5, 14, 96, 97, 98
Stillbirths	5, 14, 16, 96
Suicides	21, 97, 98
Training centres for mental defectives	6, 26, 72, 85, 87
Training homes	58, 59
Transport for staff	25
Tuberculosis	61
„ care associations	65
„ death rates	19, 61, 97, 98
„ mass miniature radiography	65, 71
„ notifications	61, 99
Unmarried mothers and their babies, care of	5
Vaccination	6
Vascular lesions of the nervous system	20, 97, 98
Venereal diseases	7
Vital statistics	5, 14, 96, 97, 98
Water supply	30, 31, 38, 43, 9
Welfare foods, distribution of	5
Whooping cough immunisation	6
Yellow fever vaccination	6, 7